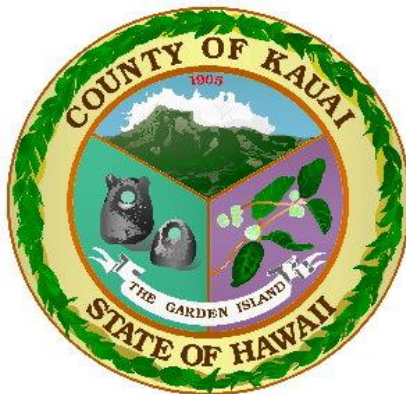




# **COUNTY OF KAUAI AGENCY ON ELDERLY AFFAIRS**

**4-Year Area Plan on Aging  
October 1, 2019 – September 30, 2023**



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**FOUR-YEAR AREA PLAN**  
**October 1, 2019- September 30, 2023**  
**for the**  
**Agency on Elderly Affairs**  
**County of Kaua‘i, State of Hawaii**  
**As the Planning Service Area 1**

**in the**  
**State of Hawai‘i**

## Exhibit B: Table of Contents

Cover Page  
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Executive Summary

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## Exhibit C: Verification of Intent

### Verification

This Area Plan is submitted for the County of Kaua'i Agency on Elderly Affairs for the period October 1, 2019 through September 30, 2023.

It includes all assurances and plans to be followed by the County of Kaua'i Agency on Elderly Affairs under the provisions of the Older Americans Act, as amended to date, during the period identified. The Area Agency on Aging/Aging and Disability Resource Center (AAA/ADRC) agrees to develop a comprehensive and coordinated system of services and to serve as the advocate for older people and persons with a disability in the planning and service area.

The Area Plan has been developed in accordance with the uniform issued by the Executive Office on Aging and is hereby submitted to the State Executive Office on Aging for approval.

\_\_\_\_\_  
Date  
Signed \_\_\_\_\_  
Area Agency Director

The AAA/ADRC Advisory Council has had the opportunity to review and comment on the Area Plan.

\_\_\_\_\_  
Date  
Signed \_\_\_\_\_  
Chairperson  
AAA/ADRC Advisory Council

The governing body of the AAA/ADRC has reviewed and approved the Area Plan.

\_\_\_\_\_  
Date  
Signed \_\_\_\_\_  
Mayor, County of Kaua'i



## EXHIBIT D: Executive Summary

### Executive Summary

This 4-Year Area Plan on Aging covers the federal funding period of October 1, 2019 – September 30, 2023. It serves as a planning and compliance document which enables the County of Kauaʻi to receive federal funds under the Older Americans Act (OAA), through the Administration on Community Living and the State Executive Office on Aging. The plan describes the older adult population on Kauaʻi and the approaches to develop a wide-ranging and coordinated system of services to promote the well-being of Kauaʻi's older adults.

The Act, established in 1965, has played a critical role in determining our nation's health and long-term care system to help older adults access information and provide opportunities for



2019 Kauai Outstanding  
Female & Male Older Americans Honorees  
Jean M. Dobashi & Neil F. Brosnahan

maintaining their health and well-being in the community. The increasing numbers of those aging in America is creating new challenges and opportunities for our nation's system of care for older adults. The number of older people is increasing rapidly, and those reaching age 65 are living longer than ever before. By 2040, there will be about 82.3 million older persons, over twice their number in 2000. People age 65 and over represented 15.2% of the population in 2016 but are expected to grow to be 21.7% of the population by 2040. These shifts in the aging population and increasing numbers will have an overwhelming effect on the nation's system of long-term care.

This plan presents strategies that are focused around principles put forth in the Older Americans Act which forms the basis for the direction over the next four years. It outlines five major issue areas: activities for disease prevention and social engagement; support for caregivers; access to information and care options; in-home and community-based programs and services; person-centered approaches for at-risk older adults; and elder rights and benefits. The plan outlines the

overall objectives that will be carried out over the next four years to move toward achievement of the following five goals established by the State Executive Office on Aging and strategies established by the County of Kaua'i Agency on Elderly Affairs:

~ **Maximize Opportunities for Older Adults to Age Well, Remain Active and Enjoy Quality Lives while Engaging in Their Communities.**

Strategy 1-1: Promote healthier living through evidence-based programs and volunteerism.

~ **Forge Partnerships and Alliances that will give Impetus to Meeting Hawaii's Greatest Challenges for the Aging Population.**

Strategy 2-1: Expand and strengthen access to services with the aging network.

Strategy 2-2: Increase the quality of life for older adults and persons with disabilities living in the community.

~ **Strengthen the statewide ADRC system for persons with disabilities, older adults, and their families.**

Strategy 3-1: Promote and strengthen the ADRC system process.

~ **Enable Older Adults to Live in their Communities through the Availability of and Access to High Quality Long-Term Services and Supports (LTSS), including Supports for their Families and Caregivers.**

Strategy 4-1: Promote and expand innovative programs that meet the needs of older adults and their caregivers.

Strategy 4-2: Pursue and promote a person-centered system that meets the needs of older adults and their caregivers.

~ **Optimize the Health, Safety and Independence of Hawaii's Older Adults.**

Strategy 5-1: Expand and foster collaboration with the aging network to ensure older adults and persons with disabilities live safely and independently.

AEA has chosen to make efforts to move forward in its systems development:

- ✓ continue to develop its ADRC website where older adults and families can access information;
- ✓ support integration of a No Wrong Door Model of a statewide ADRC System;
- ✓ promote and expand evidence-based disease prevention programs, Diabetes Self-Management Program (DSMP), EnhanceFitness physical activity program, the Chronic Disease Self-Management Program (CDSMP), also known as Better Choices, Better Health and other educational opportunities;
- ✓ work on community collaboration and partnership to promote older adults safety and

- independence;
- √ explore models for care options that are directed by the older client or consumer.

With this in mind, the AEA will continue to support Kauai's older adults to "Age Well, Live Well, Kaua'i" and strive to attain the goals and objectives as outlined in this Area Plan over the next 4 years.

## EXHIBIT E: Introduction

### Orientation to AAA Plan

This Area Plan is a document submitted by the Area Agency on Aging/Aging and Disability Resource Center (AAA/ADRC) to the Executive Office on Aging (EOA) in compliance with the Older Americans Act and for the receipt of subgrants or contracts from the Executive Office on Aging's Title III grant. It contains the Area Agency's strategy for the development and implementation of a comprehensive and coordinated system for long term care in home and community based settings. This system of services is in a manner responsive to the needs and preferences of the older individuals and their family caregivers and in accordance with all federal requirements. The period of time covered by this plan is October 1, 2019 to September 30, 2023.

This plan is made up of five major parts. Part I provides an overview of the older adult population of the County of Kauai and the programs and services available. Part II describes the context in which programs and services are developed. Part III provides specific goals, objectives, and plans for action over the next four years. Part IV summarizes the plan for allocating funds for access, in-home, legal assistance, and community-based services received under Title III of the OAA and State Funds. This section also includes the previous year's expenditures of public funds. Part V reviews the evaluation strategy. The Appendices provide assurances made by the Area Agency on Aging and other pertinent information.

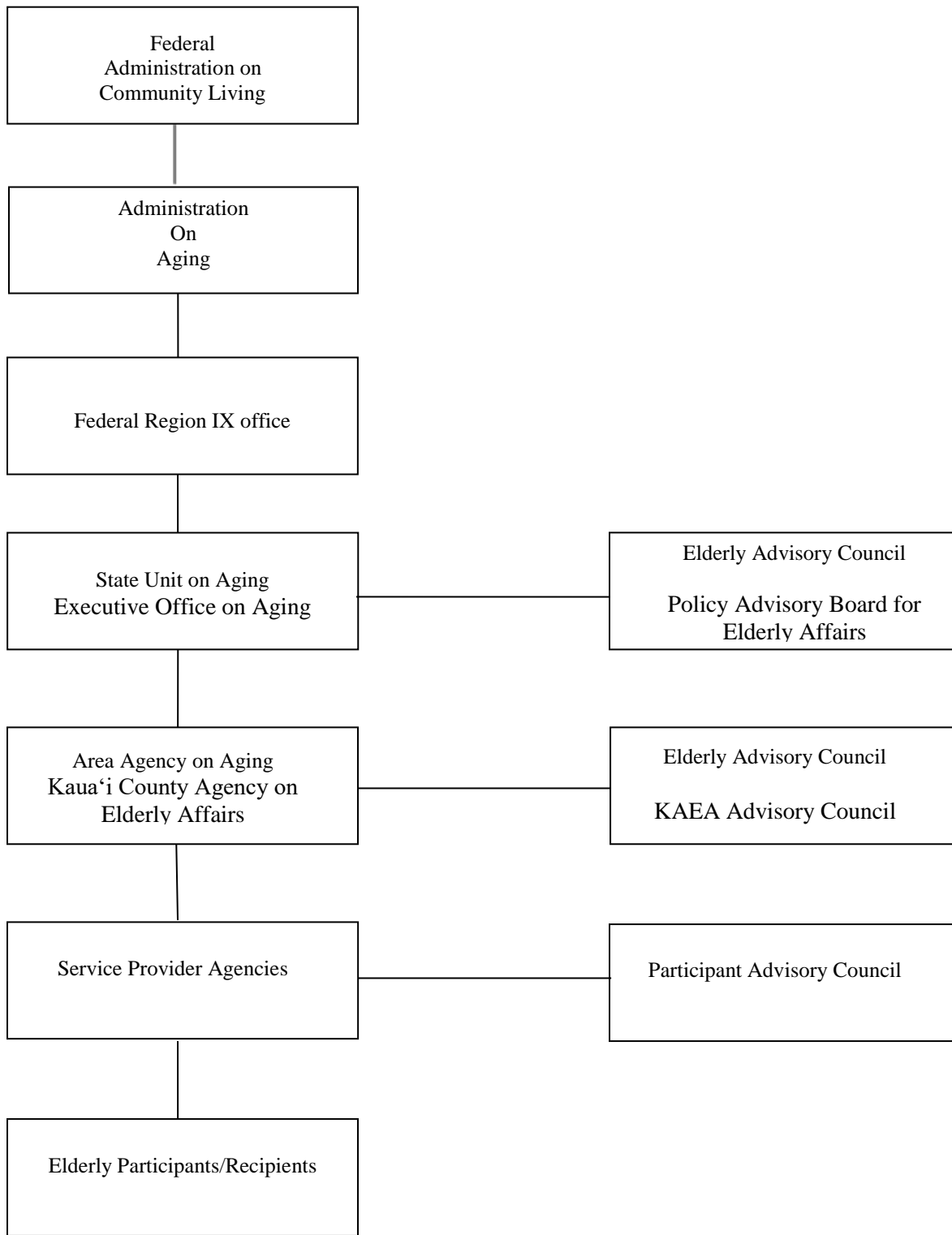


### An Overview of the Aging Network

As a result of the Older Americans Act passed by Congress in 1965, a social services and nutrition services program for America's older adults were established. In addition, State and Area Offices on Aging were established and a nationwide "Aging Network" was created. The purpose of this "Network" is to assist older adults to meet their physical, social, mental health, and other needs and to maintain their well-being and independence.

The U.S. Department of Health & Human services created a new organization; the Administration on Community Living heads the Aging Network on the federal level. It is headed by the Administrator who also serves as the Assistant Secretary for Aging and reports directly to the Secretary of Health and Human Services. The Administration on Aging is led by the Assistant Secretary for Aging and it is the agency that awards Title III funds to the states and monitors and assesses state agencies which administer these funds. Chart I illustrates the flow of responsibility from the Federal level, to the State and County levels.

Chart 1  
National Aging Network



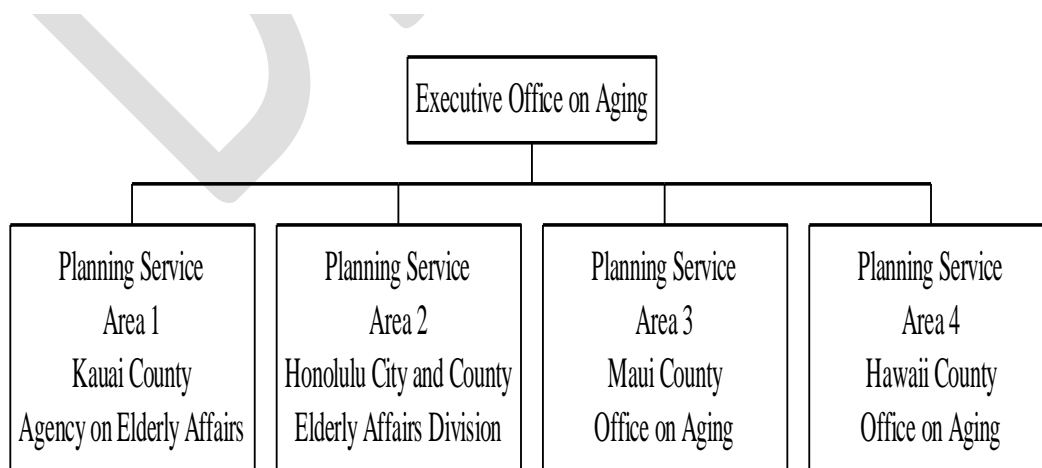
The State Executive Office on Aging, under the State Dept. of Health, is the designated lead agency in the network at the State level. Amendments to the Older Americans Act in the year 2000, requires the Executive Office on Aging to plan for and to offer leadership at both the state and local levels in the coordination of the delivery of access, home, and community services to the older adult population. This Office is responsible for statewide:

- \* planning
- \* policy and program development
- \* advocacy
- \* research
- \* information and referral
- \* coordination of services provided by public and private agencies for our elders and their families.

Chapter 349 of the Hawaii Revised Statutes established the Policy Advisory Board for Elder Affairs (PABEA) which assists by advising on the development and administration of the State Plan and conducting public hearings on the State Plan, by representing the interests of older persons, and by reviewing and commenting on other State plans, budgets and policies which affect older persons.

The Executive Office on Aging has delineated the State into distinct planning and service areas for purposes of planning, development, delivery, and the overall administration of services. The EOA has designated each of the counties of the State -- namely, Kauai, Honolulu, Maui, and Hawaii -- as planning and service areas. Kalawao County on the island of Molokai, currently under the administrative jurisdiction of the State Department of Health, is included in the Maui Planning and Service Area.

Chart 2.  
State Network on Aging



The Area Agency on Aging (AAA) is the agency designated by the Executive Office on Aging to develop and administer the Area Plan on Aging for the planning and service area.

The County of Kauai Agency on Elderly Affairs (AEA) is the lead agency in the network for the county planning and service area. As the local AAA, the AEA shall be the leader relative to all aging issues on behalf of all older persons within the County of Kauai.

### **Mission of the Area Agency**

*The Kauai Agency on Elderly Affairs, as the designated lead County agency, plans, implements, supports and advocates for the well-being of Kauai's older adults; and serves as a one stop source of information on long term care support options and services for all residents.*

### **Vision statements of the Area Agency**

- ~ *Kauai's older adults will live independently at home or in the community with dignity and respect.*
- ~ *Kauai's family caregivers receive adequate support to care for their older adults.*
- ~ *Kauai's older adults, persons with disabilities and family caregivers will make informed choices and have streamlined access to long-term care support.*

### **Activities of the Area Agency**

The Kauai Agency on Elderly Affairs shall proactively carry out, under the leadership and direction of the State Executive Office on Aging, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, grants management, and monitoring and evaluation. These functions are designed to lead to the development and enhancement of a comprehensive and coordinated community-based system in, or serving each community in the planning and service area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities for as long as possible.

In addition, the Administration on Aging stresses the importance of emergency or disaster preparedness to support and encourage that:

- All individuals, including older and disabled persons, their caregivers, as well as Aging Services Network professionals, develop personal preparedness plans.
- All sectors of the national Aging Services Network and other professionals become full participants in coordinated preparedness and response planning between Federal, State, Tribal, and local governments, as well as the private, voluntary and faith-based sectors.

The AEA has in place a disaster preparedness plan as well as a Continuity of Operations Plan (COOP) for the County. The COOP provides a framework in which the local government, along with its officials, departments, agencies, offices and other governmental entities can plan and perform their respective functions during a disaster or national emergency.

## Staffing of the Area Agency

The Agency on Elderly Affairs' staff consists of 17 salaried positions, including Aging & Disability Services Technicians who work in designated judicial districts and are involved in providing information and assistance through home visits in the community, and outreach to identify older adults who may be in need of supportive services. The AEA Associates are equipped with portable electronic tablets and remote equipment when they conduct their home visits to assist older adults and their families in accessing information and introduce them to the ADRC website.

## Advisory Council

Each AAA has established an advisory council to provide advice and support to the agency on the planning, development, administration, and operation conducted under the area plan. There are currently 8 active members on the AEA Advisory Council, representing older adults, local agencies and organizations, and the community-at-large. These members have offered support and advice on the various programs and services of the AEA at regular meetings or through ad hoc sub-committees to review documents, proposals, and evaluation of services.

The Advisory Council members also provide support for various activities of the AEA, which includes the annual Older Americans Recognition event.



AEA Advisory Council  
With Kealoha Takahashi,  
Executive on Aging

## Organizational Structure

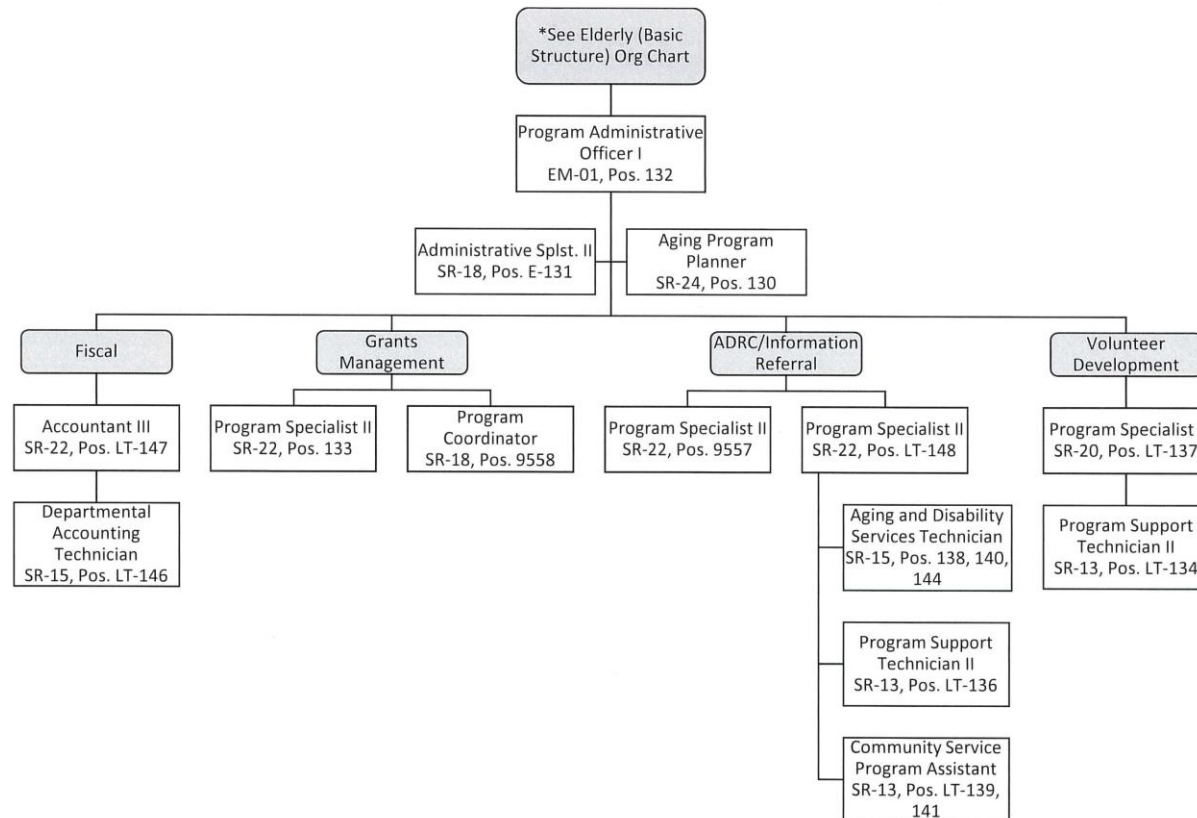
The following charts describe the organizational structure of the Area Agency and the local-level network on aging service.



Approved by: *Summer M. Negi* 4/11/2019  
 Department of Human Resources Date

COUNTY OF KAUAI  
 AGENCY ON ELDERLY AFFAIRS

Key:  
 ● – Seasonal  
 ● – Section 3  
 ● – Temporary Reallocation

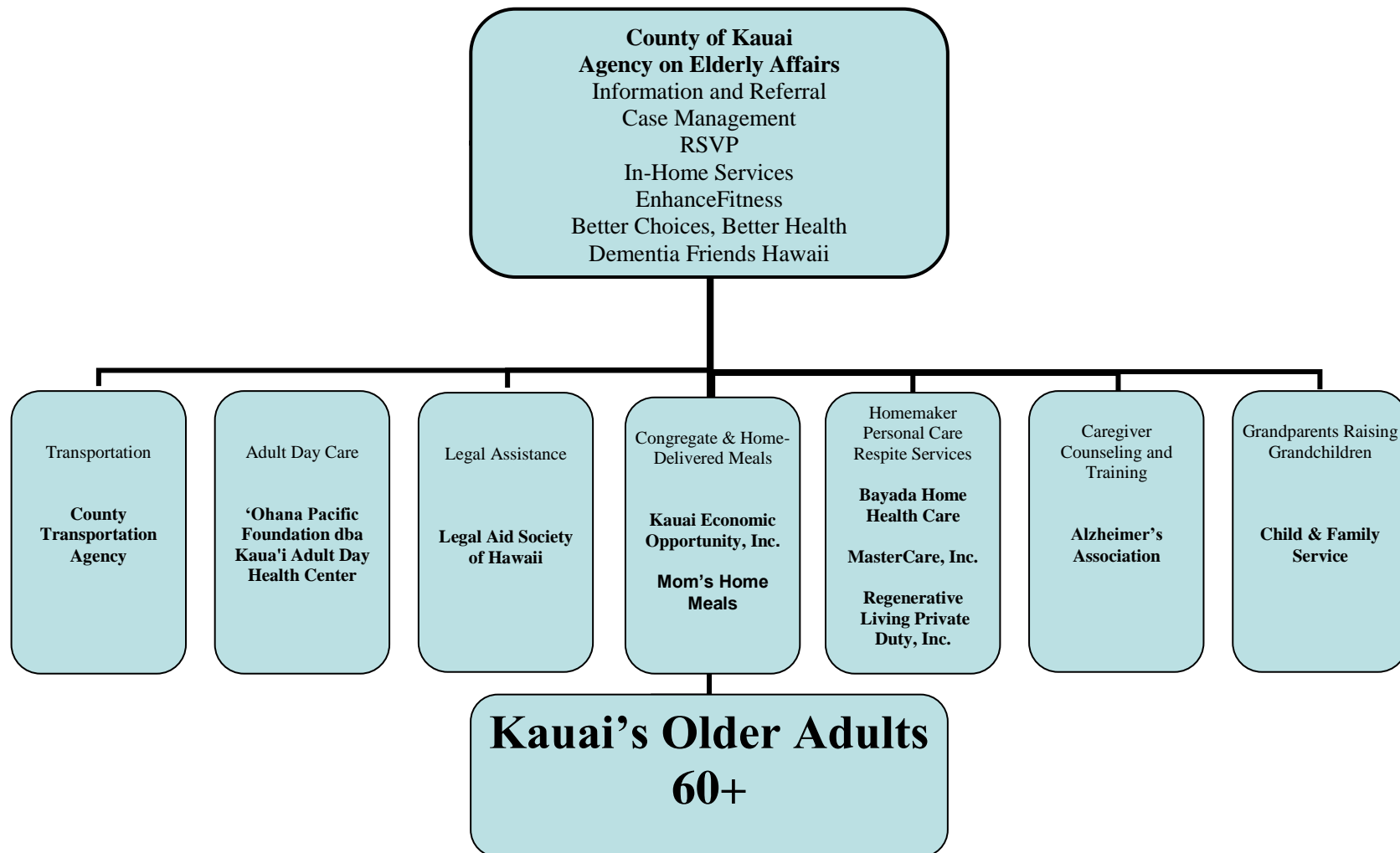


DEPARTMENT USE

HUMAN RESOURCES USE ONLY  
 Date uploaded to SharePoint: APR 17 2019  
 Revision Date: 04/17/2019

Chart 3  
 AAA/ADRC Organization

Chart 4  
Local Level Network on Aging



### **AAA Planning Process**

The Agency on Elderly Affairs established a planning timeline and work plan in regards to the planning and development of the Area Plan:

- Planning WebEx meetings led by the Executive Office on Aging (EOA) addressed topics such as the planning process and data collection and review. The purpose of the WebEx meetings was for Area Agency staff to plan and complete the required components of the Area Plan
- Surveys were planned, coordinated and conducted which were used to gather information from seniors and family caregivers.
- Focus groups were conducted with seniors and key leaders of agencies providing service to the frail and elderly and their caregivers.
- Key Informant Interviews were also conducted with service provider representatives to gather additional information from those intimately involved with the various services.
- Public hearing notices also appeared in The Garden Island and public hearings were scheduled at the two community focal points to provide opportunities for older adults, caregivers, agencies, and the public to offer comments to the Area Plan.

### **Purpose**

The purpose of this planning process was to determine needs of older adults and their caregivers by being inclusive and using a variety of methods to gather information and plan effectively to address a growing older population. Collectively, the process establishes a blueprint and framework in the development of the 4-year Area Plan that outlines appropriate strategies to continue to develop a comprehensive and coordinated system of services for older adults. This system development, focused on aging in place and person-centered, will help older adults live independently in their homes and their communities for as long as possible.

### **Public Informational Meetings**

Notice of public informational meetings were advertised in The Garden Island newspaper on March 3 and March 5, 2020, inviting the public to attend and to comment on the proposed Area Plan on Aging through written or oral testimony. In addition, fliers of the scheduled meetings were also distributed. Meetings were held at the two community focal points:

Tuesday, March 3, 2020  
1:00 p.m. – 2:00 p.m.  
Anahola Clubhouse  
3900 Kawelo Street  
Anahola, Kaua'i

Thursday, March 5, 2020  
12:00 p.m. – 1:00 p.m.  
Hanapepe Neighborhood Center  
4451 Puolo Road  
Hanapepe, Kaua'i

The proposed Area Plan was available for review on February 17, 2020, at the AEA and also by visiting the County of Kaua'i ADRC website at [www.kauaiadrc.org](http://www.kauaiadrc.org).

See Appendix D for attendance of public informational meetings and oral testimony.

**EXHIBIT F: PART I. Overview of the Older Adult Population and Existing Programs and Services**  
**Overview of Older Adult Population --**  
**Population Profile**

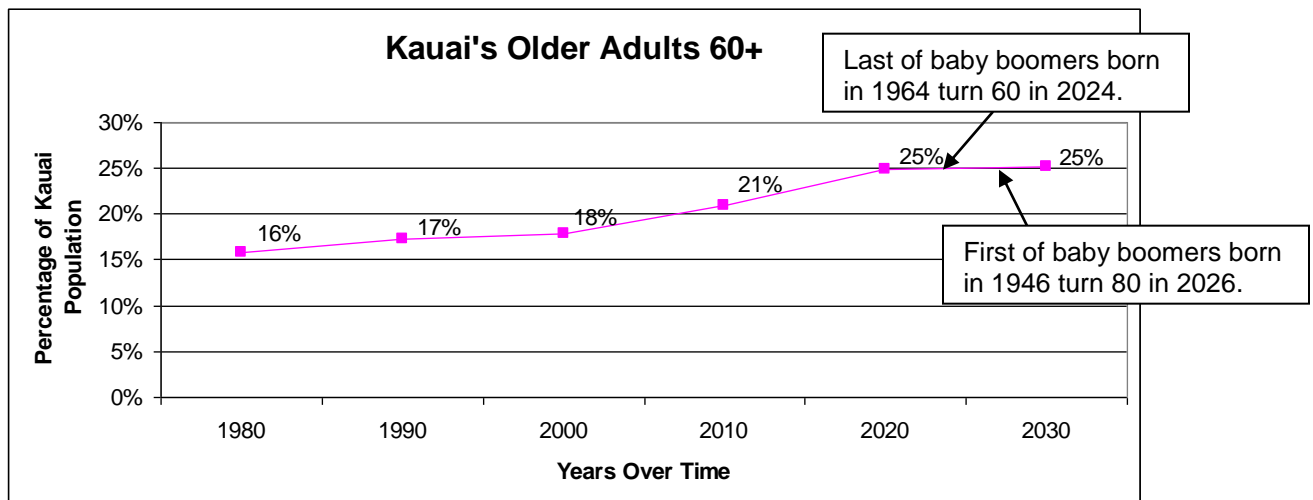
***Kaua'i's Older Adults Continue to Increase in Numbers and Proportion***

Looking at the population profile in the previous Area Plan (2015-2019), Kaua'i County's number of older adults 60+ has continued to grow at a higher rate since 1980 relative to the county's overall total population growth. Between 2010 and 2018 projections, the numbers and proportion of older adults reached an increase of 34.43%, more than 458% the rate of increase of Kaua'i's total population of 7.51%.

	60+ pop.	Total pop.	% of total pop.	% Increase in 60+ pop. between decades	% Increase in total pop. between decades
1980	6,125	39,082	15.70%		
1990	8,877	51,177	17.30%	44.93%	30.95%
2000	10,468	58,463	17.90%	17.92%	14.24%
2010	14,723	67,091	21.94%	40.64%	14.75%
2018	19,793	72,133	27.07%	34.43%	7.51%

Source: US Census Bureau, Dept. of Business, Economic Development & Tourism (DBEDT)  
 Kaua'i Area Plan on Aging, 2015 – 2019

The first of the baby boomer generation (those born 1946 through 1964) turned 65 years of age in 2011. Previous projections from US Census Bureau indicate that Kaua'i's older adult population will comprise more than 25% of the total population beginning in 2020. The last of the baby boomer generation (born in 1964) will turn 60 by the year 2024 with the first of the boomers (born in 1946) who turn 80 years old in 2026.



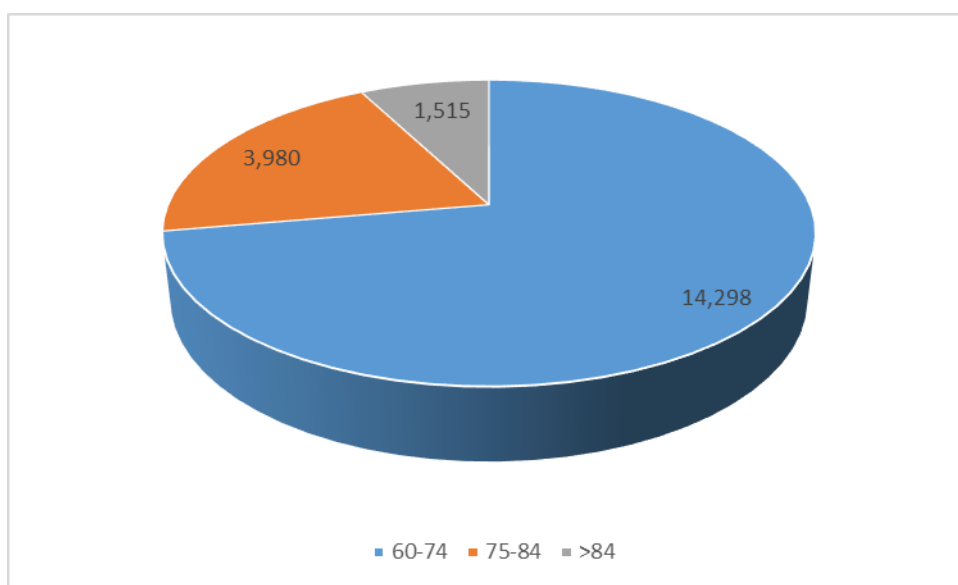
Source: DBEDT, Economic Data & Reports, Population & Economic Projections for the State of Hawai'i to 2030  
 Kaua'i Area Plan on Aging, 2015 – 2019

According to the 2018 US Census American Community Survey, the County of Kauai has 19,793 older adults 60+, comprising 27.43% of Kauai's total population. Of those 60 years and older, those 60-74 comprise the largest group, followed by those 75-84. Those 85+ make up 8.11% of Kauai's older adults.



Photo: Older Americans Month Recognition Ceremony, May 2019, Honorees represent the AEA's Efforts to support Kauai's older adults to "Live Well, Age Well".

Kauai's older adults 60+			
60-74	75-84	>84	Total
14,298	3,980	1,515	19,793
72.2%	20.1%	7.7%	100%

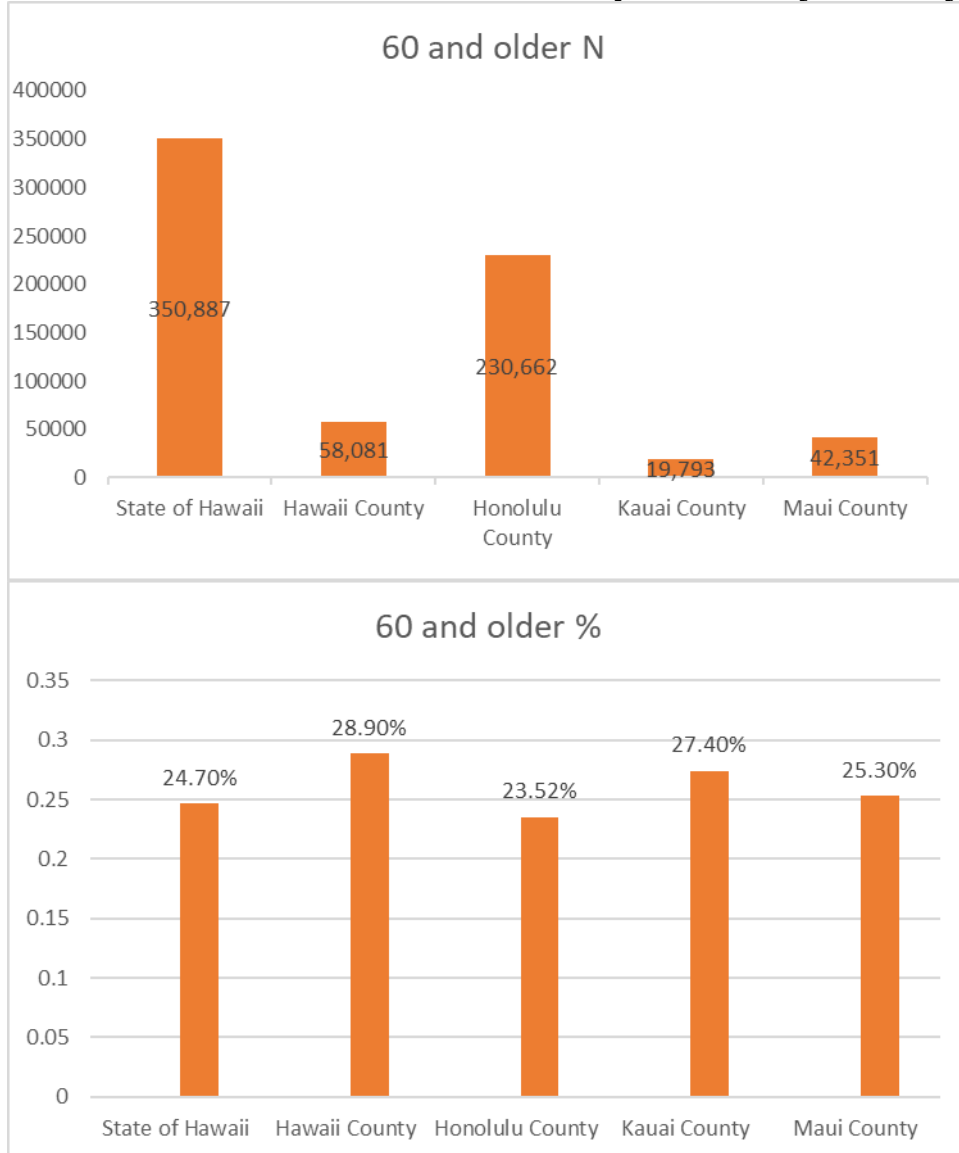


Source: US Census 2018 estimates

### **Kaua'i's 60+ Population Percentage 2nd Largest in State**

Kauai County's percentage of older adults in comparison to the total population ranks the 2nd largest proportion in comparison to the other counties within the State of Hawaii, as shown in the graphs below. This presents opportunities and challenges in planning for the aging of Kauai for the future years and the anticipated increase in the older population.

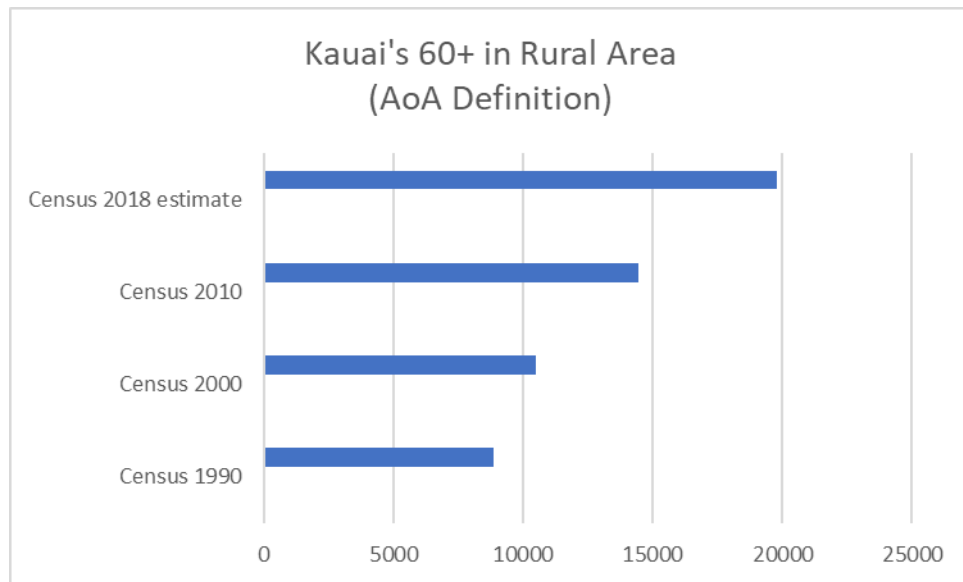
### **State of Hawaii's Older Adult Population by County**



Source: DBEDT 2018 estimates

### **Kaua'i County - Defined as a Rural Area**

The U.S. Administration on Aging (AoA) defines a rural area “as any area that is not defined as urban. Urban areas comprise (1) urbanized areas (a central place and its adjacent densely settled territories with a combined minimum population of 50,000 and (2) an incorporated place or a census designated place with 20,000 or more inhabitants.”



Thus, all of Kaua'i's 19,973 elderly live in a designated rural area as defined by the AoA.



## EXHIBIT G: Overview of the Older Adult Population -- Issues and Areas of Concern



### ***“PLANNING FOR THE AGING OF KAUAI: CHALLENGES AND OPPORTUNITIES”***

#### **Introduction**

The County of Kauai Agency on Elderly Affairs (AEA) planned and coordinated a planning process to identify and determine the issues, concerns, and needs of Kauai’s older adults. The process incorporated a variety of needs assessment methods to obtain input from seniors, caregivers, boomers, and agencies who serve older adults. These methods included:

- Focus groups with RSVP volunteers and seniors and key leaders from service providers and community agencies/organizations.
- Key Informant Interviews with AEA service providers
- Surveys to seniors and caregivers
- Community awareness/opportunity for public comment through The Garden Island newspaper

The results helped the AEA in shaping the Area Plan in identifying current and future (anticipated) needs of Kauai’s older adult population and creative solutions or recommendations on how to realistically address some of the identified needs in supporting seniors to “Live Well and Age Well”.

#### **Focus groups**

Focus groups are a method of collecting data or information from a small group of “like” people. The intent is to learn about their perceptions, beliefs, and practices about a topic, and how to change these perceptions, beliefs and practices.

AEA coordinated a meeting with RSVP volunteers and its Advisory . A separate meeting was held with key leaders from service providers and agencies to the seniors of the Kauai community. These providers and agencies represented were the Kauai Adult Day Health, the Healthy Aging Partnership, AARP, the Alzheimer’s Association, County of Kauai Department of Parks & Recreation Seniors Program and the State of Hawaii Department of Human Services Adult Protection and Community Services.

**Table 1. Focus Groups Conducted/Dates**

Group	Date	# participants
Service providers and community agencies/organizations	Nov. 19, 2019	6
Alu Like, Inc. Kupuna	Nov. 19, 2019	4
RSVP Volunteers and RSVP Advisory Board	Nov. 21, 2018	11
Foster Gransparents	Nov. 21, 2018	3
Alzheimer's Caregiver Support Group	Nov. 21, 2018	5
AEA Advisory Council	Nov. 26, 2018	8



RSVP Volunteers & Advisory Board  
Mind Map

### Key Informant Interviews

Key Informant Interviews are one-on-one interviews with individuals who have knowledge and experience about the topic because they work, volunteer or are leaders in the field of aging. Interviews were held with key staff and leaders of the following agencies and organizations:

**Table 2. Key Informant Interviews**

KEY INFORMANT	SERVICES PROVIDED TO OLDER ADULTS
Kauai Adult Day Health	Supervised day time program for disabled and frail elderly. Provides caregiver support groups, caregiver education, recreation activities, nutrition, medication administration.
Kauai Fire Department	Coalition partner in the Fall Prevention and Wellness Program for Kupuna. Educate elders on life safety and preventing injuries associated with falls and fire; ensure safety in the homes of seniors by installing fire alarms, grab bars, shower chairs.
County Department of Parks and Recreation	Provides social and recreational activities that enhance senior lives, support independence and encourage continued involvement in and with the community.
Ho'ola Lahui Hawaii	Native Hawaiian Health Care System providing services in primary health care, dental care, behavioral counseling, substance abuse counseling, health promotion, health education, chronic disease management, nutritional counseling, fitness classes, pharmacy services and case management services.

YWCA	Provides programs for victims of domestic violence, sexual abuse, sexual assault and preventive and intervention education, skills training and opportunities for necessary change, individual counseling, support groups and a 24-hour crisis hotline. Provides the only Family Violence Shelter on Kaua'i.
Kauai County Housing Agency	Voucher Program to assist the elderly and persons with a disability to afford a decent, safe and sanitary housing in the private market.

### **Surveys**

Surveys were conducted with seniors and caregivers in the community, along with surveys with service providers, special interest community groups and volunteer advisory board members.

### **Common themes and major comments expressed from needs assessment**

While there were numerous comments provided through the variety of methods used, this section on Issues and Concerns discusses the major comments and themes expressed from the focus groups, interviews, and surveys.

## **Major challenges faced by seniors 60+ on Kaua'i and persons with disabilities**

**Table 3. Challenges Faced by Seniors**

Transportation issues – access to service, limited operating hours, long rides and affordable options
Limited finances and income
Available and affordable home and community-based/long term care services
Health issues – high cost of medical care, failing health, balance, strength, hearing, memory, vision, affordable dental care, dental health coverage
Affordable housing – rising rental costs, lack of affordable & safe housing
Loneliness, isolation
Ease of access to information and resources available

### ➤ **Transportation**

- Lack of affordable and accessible transportation options and alternative modes such as ride sharing services; impacts access to health care services;
- Limits on transportation schedules, including weekends and holidays, long duration on travel, wait time; more rest stops; expand routes and times of service (later hours); awareness about paratransit services and eligibility requirements;
- Loss of driving privileges means loss of independence;
- Vouchers for shared transportation such as Uber, Lyft, GoGoGrandparent;

➤ **Limited finances and income**

- Fixed limited income leads to lack of funds for medications; high cost of medical services, medications, medical insurance;
- Retired seniors on fixed income caregiving for parents are supplementing the cost of food, personal hygiene products and care for the loved one; lack of caregivers pay for retired children;
- High cost of long term care services and nursing home placement are unaffordable;

➤ **Available and affordable home and community-based/long term care services**

- Access funding from grants, government, donations; lack of agencies to provide services; shortage of workers for agencies providing these services;
- Limited volunteer assistance with Activities of Daily Living and basic needs to support seniors; provide trainings of these services for families and caregivers and at islandwide locations; provide online information and resources on website;
- Concern about workforce shortage for organizations/agencies providing these services;
- With the increase in longevity, how will we provide for our elders needs for services, sheltering; high cost of long-term care facilities, assisted living;

➤ **Health Issues**

- Increase chronic disease self-management workshops, low-impact physical activities exercise classes, falls prevention programs;
- Education classes on nutrition, healthy meal planning, dementia, medication management;
- Senior discounts medical/dental care, grants for medical/dental procedures/equipment;
- Access to information and resources available;

• **Affordable Housing**

- Affordable assisted living housing;
- More senior housing projects;
- Affordable rental housing projects;

• **Loneliness, Isolation**

- Concern for seniors experiencing depression, loneliness, loss of companionship, isolation when dealing with loss of a loved one, spouse;
- Preservation of self-worth, dignity, values as longevity increases;
- Abandonment by caregivers or family, living alone;
- Reluctance/fear of attending social events, recreational activities caused by loss of vision, hearing, memory;

• **Ease of Access to Services**

- Lack of educational/training workshops on nutrition, caregiving, health, financial, end of life;
- Island-wide locations of educational/training workshops at multiple times per year;
- Online information materials - Seniors don't know how to access information; people need to learn how to use computers;
- Limited number of organizations/agencies providing home and community-based services on Kauai;

- Mobility access throughout the island;

**Table 4: Challenges of caregivers for older adults**

Improve monthly island-wide support groups
Lack of training workshops for caregivers
Lack of social/recreational activities for their loved ones
Long-term care placement



- **Grandparents raising grandchildren** shared that they assumed the role of caregivers because of an unstable environment for children due to substance abuse, CPS involvement, homelessness, incarceration (of the parents). They expressed that they did it out of love for their grandchildren and a desire to keep family together. They shared the following concerns and issues:

**Table 5: Challenges of Grandparents Raising Grandchildren**

Finances are limited in retirement years
Concern for their own health, not enough time and energy; no respite or ability to take a break
Going back to raising children in their elder years
Dealing with behavioral challenges, including children's anger
Having children and grandchildren with special needs
Dealing with homework, activities for grandchildren

Seniors indicated the top priorities of how AEA can support the elderly population on Kauai were:

- Transportation
- Ease of Access to Services
- Housing
- Health
- Caregivers
- Food
- Recreation / Activities

## **Ideas or possible opportunities for the community to support older adults and help to address some of the needs and challenges**

**Table 6. Ideas or opportunities to address some of the needs and challenges**

Educate families and community; public awareness
Promote civic engagement and community involvement
Encourage long term care planning and options
Increased coordination and collaboration with community agencies
Seek other funding opportunities

- Need for education and awareness on available resources;
  - Publicize services through a campaign to inform public of all resources available; more radio publicity, community cable channel announcements, restore senior calendar in local newspaper;
  - 1 website with all information in a professional clear way; look at grant opportunities for media campaign;
  - Access to educational materials;
- Recruit RSVP volunteers, recruit volunteer stations;
- Provide educational workshops on future financial planning, preparation, financial awareness; long-term care planning, housing needs, health promotion; legal matters;
- Provide education on caregiving for the elderly, who will provide care, comfort; initiate a caregivers' conference day with workshops, training, resources available;
- Provide language access to individuals with limited English proficiency.;
- Seek grant opportunities; create fund-raising event that all proceeds go to AEA for services.

**Table 7: SUPPORT TO HELP CAREGIVERS OF OLDER ADULTS**

Support groups to share concerns and practical ideas; faith-based support groups
Island-wide educational workshops and training, multiple times per year
Counseling and having someone to talk to
Information on legal issues and community resources
Family dynamics, roles, and how to manage conflict among family members
Hands-on techniques, ie. bathing, transferring, proper use of medical equipment
Financial planning for the future

**Table 8: SUPPORT TO HELP GRANDPARENTS RAISING GRANDCHILDREN**

Financial support and funding to help with school and enrichment activities
Assistance with navigating through system of services and increased awareness of programs and services



## **Unmet needs of seniors and persons with disabilities**

### **➤ Adequate and affordable home and community-based services**

- Home and community based services should be more affordable; give options to choose services; offer choice of service provider; community cohort as informal case manager;
- Insufficient nutrition, accommodations for specialized HD meals due to dietary restrictions, allergies; health promotion workshops;
- Psycho-social services not covered by insurance; need for more Mental Health case management services on island; need for in-home Mental Health services for the home-bound individuals;
- Need for services such as medication management, financial management and planning/preparation; low cost vendor to do financial management for bill payments, etc;
- Need more interesting activities, including diverse exercise programs and culture-based classes;
- Assistance with personal care – cost from private providers is expensive, lack of service workers and need adequate screening/background checks of service workers; community cohort
- Affordable housing – need for housing for disabled persons/homeless; need for elderly housing projects; HUD more attractive to landlords/increase available vouchers;



## **Perspectives on the role of government in helping older adults and family caregivers**

### **Role of government**

- Act as a safety net and provide oversight and regulations for setting standards for senior services/care; a facilitator;
- Develop broad range policies;
- Foster interagency partnerships and explore linkages to seniors through clubs, groups, and other organizations;
- Provide a seamless access to services and sharing resources; act as a middle person/lifeline; remove barriers for persons with disabilities;
- Keep up and increase social security and medical benefits.

### **What more should government do?**

- Provide incentives for legitimate caregiving and retrofitting of homes;
- Have programs on long term care/financial planning;
- Look at available long term care options, including having available long term care beds and residential adult care homes, examine cost of guardianship;

- Provide language translation on documents, flyers, website;
- Get more funding/stimulus monies; No decrease of funding for community based long term care programs and services;
- Provide more opportunities for equal access to resources for neighboring islands;
- Be aware of caregivers' (grandparents raising grandchildren) needs and make exceptions to programs, ie. allow registration or enrollment for programs for non-working caregivers.

## COMMENTS FROM KEY INFORMANTS (SERVICE PROVIDERS)

One on one interviews with service providers (those agencies and organizations providing direct services to older adults) suggested issues and concerns at a more administrative or operational level because of their intimate knowledge and experience in providing services. Their comments also supported many of the comments expressed by older adults and families during the focus groups and surveys, as presented earlier in this discussion.

**Table 9: Issues and Concerns of current services as expressed by providers of services**

Need more public awareness of programs, services and resources available in the community. Provide public announcements on cable channels, community interest channels, radio, senior calendars in the local newspaper, publications, other media calendars and websites.
Re-evaluate qualifications for paratransit (transportation) services to increase efficiency of service; there's increasing population of 60 ± year olds still active in the workforce and fully functional. Explore providing more options of transportation to move seniors and offer incentives/vouchers for shared rides (Uber, Lyft, GoGoGrandparents). Restructuring fixed routes, increasing bus stops and increasing bus/equipment force are being examined.
Increase partnering and collaboration to include doctors, hospitals, pharmacists, emergency services for new initiatives/programs.
Explore expansion of services to accommodate the home-bound and isolated communities.
Offer incentives to working caregivers of qualified home-bound 60± year olds in need of in-home services.

### **Suggestions for program expansion based on needs identified:**

- Increase frequency of homemaker service – need at least weekly service, kitchen becomes breeding ground for roaches, ants, bugs. Provide services to those that don't have a family/personal advocate;
- Integration and inclusion of people with disabilities.
- Expand in-home services to include flu shots for the frail and home-bound elderly; flu clinics at isolated sites in the community; simple legal document assistance for the frail and home-bound elderly and at isolated sites in the community;
  - Increase respite support to allow caregivers opportunities to attend activities that include educational workshops, social activities or events. Extend Adult Day Care on weekends and evenings. Caregivers report that they would like to attend different activities and don't have the funds to have someone else to come in



### **Increased funding**

- More program funding to help grandparents on limited incomes who are raising grandchildren for the children's education, specialized tutoring, and community sports and recreational fees etc.;
- Increase funding to provide an adequate frequency of in-home services.
- Organizations need to know their legislative representatives and keep them informed of their elderly constituents' needs.

### **Possible recommendations to address needs of elderly:**

Realizing government cannot provide for it all, key leaders of service providers, government agencies, and community agencies and organizations expressed the necessity for community involvement and the encouragement of sense of community:

- Volunteerism
  - Volunteerism was recommended to help support new activities and services to address the needs identified, such as volunteers to check in on those homebound (possibly re-start of Telephone Reassurance program), volunteers to do yard cleaning, escort elderly individuals to medical appointments or provide shopping for the home-bound.
- Healthy Aging
  - Look at providing fitness opportunities to include people with disabilities, clients at adult day care/health facilities;
  - Inclusion of caregivers of people with disabilities opportunities to participate in Better Choices, Better Health program workshops;
  - Increased support from the medical community and community-at-large for healthy aging programs; ie. providing the facilities or resources to support programs.
- Education
  - Providers also identified the need and importance of education in the community. They expressed a need for conferences and mini workshops for educational aspect of discussing senior issues as well as a high need for hands-on and training opportunities for caregivers;
  - Have a series of educational curriculum in place, for example: an injury prevention program that includes in-home safety assessment, recommendations and follow-up; a medication management program facilitated by a registered nurse or appropriate professional.
- Informal Caregivers
  - Family, friends, neighbors and church members to assist seniors with picking up medications from the pharmacy, provide transportation to medical appointments, church or community events;
  - Community cohort in the role of a case manager providing information on services and resources available in the community.

### **Summary and Closing Remarks**

In looking at the all of the comments gathered through the needs assessment process, common issues were identified by participants including the importance of transportation and available and affordable home and community-based long term care services, limitations on financial resources, concern and support for families and caregivers, and basic access to information and services.

Ideas or possible solutions and opportunities which were identified in planning for the aging of Kauai and to support older adults focused largely on education, volunteerism and Healthy Aging, and encouraging more long term care planning and options for services. Also highlighted and discussed by participants was the need for increased public awareness of AEA, access to information and services, and resources available in the community.

Participants shared that they were pleased to have the opportunity to provide their input and were looking forward to the implementation of their ideas shared.

**EXHIBIT H: Description of Existing Programs and Services**  
**January 2015**

Information provided by agencies and organizations completing AEA Senior Resource Survey and through other resources. Agencies listed serve older adults 60+ and may serve disabled persons under 60 as identified below.

**\*\*denotes programs and services administered or contracted by the AEA**

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
<b>ACCESS</b>				
Information & Assistance	County Agency on Elderly Affairs	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	AARP		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Aloha Independent Living Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Alu Like, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Alzheimer’s Association – Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Catholic Charities		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kauai Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
	The Salvation Army - Lihue		Hanalei, Kawaihau, Līhu‘e	Y
Outreach	County Agency on Elderly Affairs	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Aloha Independent Living Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Veterans Affairs – Vet Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Hawaii Foodbank, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kaua‘i Independent Food Bank, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Case Management	County Agency on Elderly Affairs	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	
	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Community Services for the Developmentally Disabled		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Veterans Affairs – Vet Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Hospice		Hanalei, Kawaihau,	Y

			Līhu‘e, Kōloa, Waimea	
<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Case Management	Mastercare, Inc.		Hanalei, Kawaihau, Līhu‘e, Koloa, Waimea	Y
Kupuna Care Transportation	County Transportation Agency	**	Hanalei, Kawaihau, Līhu‘e, Koloa, Waimea	N
Transportation - paratransit	County Transportation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Transportation - public	County Transportation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	The Salvation Army - Lihue		Hanalei, Kawaihau, Līhu‘e	Y
Transportation – Bus pass assistance	Workforce Development Division/Workwise Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Assisted Transportation	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>IN-HOME</b>				
Attendant Care	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Chore	Bayada Home Health Care	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Friendly Visiting	County Agency on Elderly Affairs	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Church of the Pacific, United Church of Christ		Hanalei	Y
Homemaker	Bayada Home Health Care	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Mastercare, Inc.		Hanalei, Kawaihau, Līhu‘e, Koloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Homemaker	Regenerative Living		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Personal Care	Bayada Home Health Care	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kauai Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Mastercare, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other - Nursing	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>SUPPORTIVE SERVICES</b>				
Adult Day Care	Ohana Pacific Management dba Kauai Adult Day Health Center	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Counseling	Alzheimer’s Association - Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Church of the Pacific, United Church of Christ		Hanalei	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Veterans Affairs		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Aloha Independent Living Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
	The Salvation Army - Lihue		Hanalei, Kawaihau, Lihue	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Education/Training	AARP		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Alzheimer’s Association – Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Community School for Adults		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kaua‘i Independent Food Bank, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
Elder Abuse/Neglect	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Employment Assistance	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Friendship House		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Workforce Development Division/Workwise Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Escort	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Exercise/Physical Fitness	Kauai County Recreation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Athletic Club		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Health Education/Promotion	County Agency on Elderly Affairs		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Alu Like, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Alzheimer’s Association – Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai County Recreation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
Health Screening	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Housing Assistance	Kaua‘i County Housing Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Catholic Charities		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N



<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Literacy/Language Assistance	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Meals-Home Delivered	Kauai Economic Opportunity, Inc.	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Alu Like, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Meals-Congregate	Kauai Economic Opportunity, Inc.	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	The Salvation Army - Lihue		Hanalei, Kawaihau, Līhu‘e	Y
Nutrition Counseling	Kauai Economic Opportunity, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Dept. of Veterans Affairs		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Nutrition Education	Kauai Economic Opportunity, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Veterans Affairs		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kaua’i Independent Food Bank, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
Multi-Purpose Senior Centers	Kauai County Recreation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Public Education	AARP		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Church of the Pacific, United Church of Christ		Hanalei	Y
	Dept. of Veterans Affairs		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Community School for Adults		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai County Recreation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
Recreation/Leisure	Alu Like, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kauai County Recreation Agency		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Community School for Adults		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	The Salvation Army - Lihue		Hanalei, Kawaihau, Līhu‘e	Y
Volunteer Opportunities	RSVP	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	AARP		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Church of the Pacific, United Church of Christ		Hanalei	Y
	Dept. of Human Services – Foster Grandparent Program		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Judiciary/FamilyCourt		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kauai Economic Opportunity, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Nana’s House		Koloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
	Samuel Mahelona Memorial Hospital		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	The Salvation Army - Lihue		Hanalei, Kawaihau, Līhu‘e	Y
Other – Assistive Devices	Kauai Economic Opportunity, Inc. – Persons-In-Need		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Other – Disability Communication Access Board	County Driver Licensing Division		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Other – Food assistance	Church of the Pacific, United Church of Christ		Hanalei	Y
	Kaua‘i Independent Food Bank, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Hospice Services	Kaua‘i Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Kinship Care	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Material Assistance	Catholic Charities		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
Other – Senior Employment	Workforce Development Division/Workwise Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Senior Housing	Hale Kupuna Senior Apartments		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kaniko’o		Līhu‘e	Y
	Kekaha Elderly Housing		Waimea	Y
	Līhu‘e Gardens		Līhu‘e	Y
	Līhu‘e Theater Senior Apartments		Līhu‘e	N
Other – Support Groups	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Aloha Independent Living Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Utility Assistance	Catholic Charities		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Other – Vocational Rehabilitation Support Services	Friendship House		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>LEGAL</b>				
Legal Assistance	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Child & Family Service		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Legal Assistance – Other (guardianship)	Judiciary/Family Court		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>CAREGIVER SUPPORT SERVICES</b>				
Counseling	Alzheimer’s Association – Kauai	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kaua‘i Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Ohana Pacific Management dba Kauai Adult Day Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Support Groups	Alzheimer’s Association – Kauai	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kaua‘i Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	North Shore Caregivers Support Group		Hanalei	N
Training	Alzheimer’s Association – Kauai	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Kaua‘i Hospice		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Respite	Bayada Home Health Care	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
	Dept. of Health – Community Services for the Developmentally Disabled		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Mastercare, Inc.		Hanalei, Kawaihau, Līhu‘e, Koloa, Waimea	Y
Supplemental Services	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Information Services	Alzheimer’s Association – Kauai	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Kauai Community Mental Health Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Aloha Independent Living Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Workforce Development Division/Workwise Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Access Assistance	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Human Services – Adult Protection & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
Other – Education and Material Assistance	Nana’s House		Kōloa, Waimea	Y
Other – Books	American Cancer Society		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Education	Kauai Community School for Adults		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Food assistance	Church of the Pacific, United Church of Christ		Hanalei	Y
Other – Legal Assistance (guardianship)	Judiciary/FamilyCourt		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Home medical equipment	Gammie Home Care, Inc.		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Medical, dental, and behavioral health services	Ho’ola Lahui Hawaii		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>SERVICES FOR GRANDPARENTS RAISING GRANDCHILDREN 18 AND YOUNGER</b>				
Counseling	Child & Family Service	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Queen Lili‘uokalani Children’s Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Nana’s House		Kōloa, Waimea	Y
Support Groups	Child & Family Service	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Queen Lili‘uokalani Children’s Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Respite Care	Child & Family Service	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Dept. of Health – Community Services for the Developmentally Disabled		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
	Garden Isle Healthcare		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Queen Lili‘uokalani Children’s Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Supplemental Services	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Nana’s House		Kōloa, Waimea	Y
Information Services	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Child & Family Service	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Queen Lili‘uokalani Children’s Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Nana’s House		Kōloa, Waimea	Y
	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
	Workforce Development Division/Workwise Kauai		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Access Assistance	Bayada Home Health Care		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – Education	Kauai Community School for Adults		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other - Enrichment	Nana’s House		Kōloa, Waimea	Y
Other – Food assistance	Church of the Pacific, United Church of Christ		Hanalei	Y
Other – Legal Assistance	Legal Aid Society Hawaii	**	Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Other – Limited Financial Assistance	Queen Lili‘uokalani Children’s Center		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	N
Other – Referral assistance	Dept. of Human Services – Adult Protective & Community Services Section		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y

<b>Programs and Services</b>	<b>Provider Agency</b>		<b>Area Served by Judicial District</b>	<b>Also serve disabled persons under 60</b>
<b>LONG TERM CARE SERVICES</b>				
Other – ICF/SNF	Garden Isle Healthcare		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
	Kaua‘i Veterans Memorial Hospital		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
Other – ICF/SNF	Samuel Mahelona Memorial Hospital		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y
<b>CAREGIVER SUPPORT SERVICES (for families of in-hospital patients)</b>				
Other – Inpatient Nursing and Therapy	Garden Isle Healthcare		Hanalei, Kawaihau, Līhu‘e, Kōloa, Waimea	Y



**EXHIBIT I: Map of Community Focal Points, Multi-Purpose Senior Centers, and Nutrition sites**

**Community Focal Points**

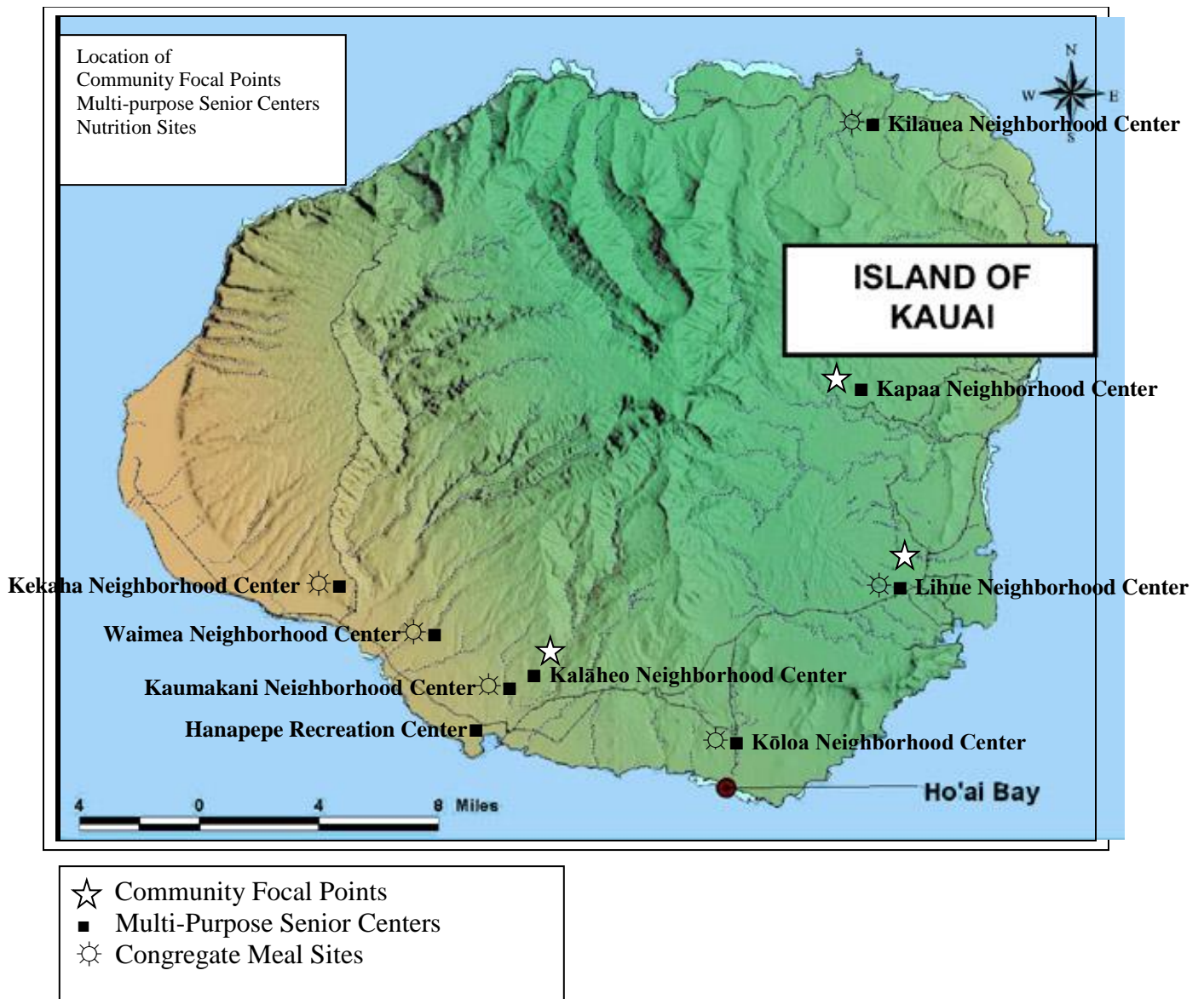
Facilities established to encourage the maximum arrangement and coordination of services for older individuals. Areas of activity designated at three areas of the island (east, central, west).

**Multi-Purpose Senior Centers**

Community facilities providing a broad range of services, which include health, social, nutritional, educational, and recreational services

**Congregate Nutrition Sites**

Meals provided to individuals in a congregate or group setting



## EXHIBIT J: Community Focal Points and Multi-Purpose Senior Centers

### Community Focal Points

Facilities established to encourage the maximum arrangement and coordination of services for older individuals. Areas of activity designated at three areas of the island (east, central, west).

Name	Address	Telephone	Geographic Area Served	Days and Hours Served	Services Which May Be Available
Kapaa Neighborhood Center	4491 Kou Street Kapaa, Hawaii	822-1931	Hanalei Kawaihau	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Recreation Volunteer Opportunities
Lihue Neighborhood Center	3353 Eono Street Lihue, Hawaii	241-6858	Kawaihau Lihue Koloa	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities
Kalaheo Neighborhood Center	4480 Papalina Road Kalaheo, Hawaii	332-9770	Koloa Waimea	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Recreation Volunteer Opportunities

**Multi-Purpose Senior Centers**

**Community facilities providing a broad range of services, which include health, social, nutritional, educational, and recreational services**

Name	Address	Telephone	Geographic Area Served	Days and Hours Served	Services Which May Be Available
Kilauea Neighborhood Center	2460 Keneke St. Kilauea, Hawaii	828-1421	Hanalei	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities
Kapaa Neighborhood Center	4491 Kou St. Kapaa, Hawaii	822-1931	Kawaihau	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Recreation Volunteer Opportunities
Lihue Neighborhood Center	3353 Eono St. Lihue, Hawaii	241-6858	Lihue	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities

Name	Address	Telephone	Geographic Area Served	Days and Hours Served	Services Which May Be Available
Koloa Neighborhood Center	3461 Weliweli Road Koloa, Hawaii	742-1313	Koloa	Mondays to Fridays 8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Congregate Meals Nutrition Education Health Education Physical Activity Recreation Volunteer Opportunities
Kalaheo Neighborhood Center	4480 Papalina Road Kalaheo, Hawaii	332-9770	Koloa	Mondays to Fridays 8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Recreation Volunteer Opportunities
Hanapepe Recreation Center	4451 Puolo Road Hanapepe, Hawaii	335-3731	Waimea	Mondays to Fridays 8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Recreation Volunteer Opportunities
Kaumakani Neighborhood Center	2301 Kaumakani Road Kaumakani, Hawaii	335-5770	Waimea	Mondays to Fridays 8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities

Name	Address	Telephone	Geographic Area Served	Days and Hours Served	Services Which May Be Available
Waimea Neighborhood Center	4556 Makeke Rd. Waimea, Hawaii	338-1122	Waimea	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities
Kekaha Neighborhood Center	8130 Elepaio Rd. Kekaha, Hawaii	337-1671	Waimea	Mondays to Fridays  8:00 a.m. to 12:00 p.m.	Transportation I&R Legal Assistance Education/Training Health Education Physical Activity Congregate Meals Nutrition Education Recreation Volunteer Opportunities

**EXHIBIT K: Congregate Nutrition Sites and Home Delivered Meals Distribution Center**

**Congregate Nutrition Sites**

**Meals provided to individuals in a congregate or group setting**

Name and Address	Telephone	District Covered	Congregate (Persons)*	Days and Hours	Other Services Provided
Kilauea Neighborhood Center 2460 Keneke Street Kilauea, Hawaii	828-1421	Hanalei	26	M, W, TH 10:00 a.m. to 12:00 p.m.	Nutrition Education Transportation I&R Education/Training Health Education Recreation Volunteer Opportunities
Lihue Neighborhood Center 3353 Eono Street Lihue, Hawaii	241-6858	Lihue	40	T, TH 10:00 am to 12:00 pm	Nutrition Education Transportation I&R Education/Training Health Education Recreation Volunteer Opportunities
Koloa Neighborhood Center 3461 Weliweli Rd. Koloa, Hawaii	742-1313	Kōloa	26	M,T,W,TH 10:00 am to 12:00 pm	Nutrition Education Transportation I&R Education/Training Health Education Recreation Volunteer Opportunities
Kaumakani Neighborhood Center 2301 Kaumakani Rd. Kaumakani, Hawaii	335-5770	Waimea	15	M,T,TH,F 10:00 a.m. to 12:00 p.m.	Nutrition Education Transportation I&R Education/Training Health Education Recreation Volunteer Opportunities

Name and Address	Telephone	District Covered	Congregate (Persons)*	Days and Hours	Other Services Provided
Waimea Neighborhood Center 4556 Makeke Rd. Waimea, Hawaii	338-1122	Waimea	22	M, W, TH  10:00 a.m. to 12:00 p.m.	Nutrition Education Transportation I&R Education/Training Health Education Recreation Volunteer Opportunities
Kekaha Neighborhood Center 8130 Elepaio Rd. Kekaha, Hawai'i	337-1671	Waimea	32	T, W, TH  10:00 a.m. to 12:00 p.m.	Transportation I&R Education/Training Health Education Nutrition Education Recreation Volunteer Opportunities
Kaniko'o Elderly Housing  Note: Kaniko'o site closed after FY 2018	726-2888	Lihue	40		

### HOME-DELIVERED MEAL SITES

#### Meals provided to qualified individuals and delivered to place of residence

Name and Address	Telephone	Districts Covered	H-D (Persons) *	Days and Hours
Kaua'i Economic Opportunity, Inc. Food Services 3343 Kanakolu Lihue, Hawaii	245-4077	Hanalei Kawaihau Lihue Koloa Waimea	309	M, T, W, TH, & F

<u>District</u>	<u>Areas covered</u>
Hanalei/Kawaihau	Kealia to Princeville
Kawaihau	Waipouli to Kapa'a
Kawaihau/Līhu'e	Hanamaulu to Wailua Homesteads
Līhu'e	Hanamaulu to Līhu'e
Līhu'e/Kōloa	Puhi to Kōloa
Kōloa	Omao to Kalāheo
Kōloa/Waimea	Eleele to Kaumakani
Waimea	Waimea to Kekaha

\*# of persons served FY 2018

**EXHIBIT L: Acute, Long Term Care Institutional and Facility Care**

<b>Facility</b>	<b># SNF/ICF LICENSED BEDS</b>
<b>Garden Isle Healthcare</b> 3-3420 Kuhio Highway #300 Lihue, Hawaii 96766 Phone: (808) 245-1802	110
<b>Hale Kupuna Heritage Home, LLC</b> 4297 A Omao Rd. Lawai, Hawaii 96765 Phone: (808) 742-7591  PO Box 1287 Koloa, Hawaii 96756-1287	84 ICF
<b>Kauai Care Center</b> 9611 Waena Rd. Waimea, Hawaii 96796 Phone: (808) 338-1681  PO Box 507 Waimea, Hawaii 96796	53 SNF/ICF
<b>Kauai Veterans Memorial Hospital</b> 4643 Waimea Canyon Rd. Waimea, Hawaii 96796 Phone: (808) 338-9431  PO Box 337 Waimea, Hawaii 96796	20 SNF/ICF 25 acute
<b>Samuel Mahelona Memorial Hospital</b> 4800 Kawaihau Rd. Kapaa, Hawaii 96746 Phone: (808) 822-4961	66 SNF/ICF 9 acute psychiatric
<b>Wilcox Memorial Hospital</b> 3420 Kūhi‘ō Hwy. Līhu‘e, Hawai‘i 96766 Phone: (808) 245-1100	72 acute

Source: Hawaii State Dept. of Health, Office of Health Care Assurance, Medicare Section, listing of Skilled Nursing/Intermediate Care facilities, [www.hawaii.gov/health](http://www.hawaii.gov/health)



## EXHIBIT M: PART II: Recommendations

### Framework

The Area Agency on Aging's recommendations subscribe to the general framework for program and service delivery for older adults developed throughout the State by the Executive Office on Aging. This framework is drawn from the Older Americans Act, as amended in 2006, and Chapter 349, Hawaii Revised Statutes. The Area Agency's recommendations are consistent with the objectives of the Older Americans Act, as amended in 2006, the U.S. Administration on Aging's goals and its strategies for Choices for Independence, and Chapter 349, Hawaii Revised Statutes Goals.

### The Older Americans Act

One of the primary and contributing federal legislation designed to address the needs of older Americans is the Older Americans Act. The Older Americans Act of 1965, as amended, states that in keeping with the traditional American concept of the inherent dignity of the individual in our democratic society, the older people of our Nation are entitled to, and it is the joint and several duty and responsibility of the governments of the United States, of the several States and their political subdivisions, and of Indian tribes to assist our older people to secure equal opportunity to the full and free enjoyment of the following objectives:

- \* an adequate income in retirement in accordance with the American standard of living;
- \* the best possible physical and mental health which science can make available and without regard to economic status;
- \* obtaining and maintaining suitable housing, independently selected, designed and located with reference to special needs and available at costs which older citizens can afford;
- \* full restorative services for those who require institutional care, and a comprehensive array of community-based, long-term care services adequate to appropriately sustain older people in their communities and in their homes, including support to family members and other persons providing voluntary care to older individuals needing long-term care services;
- \* opportunity for employment with no discriminatory personnel practices because of age;
- \* retirement in health, honor, and dignity--after years of contribution to the economy;
- \* participating in and contributing to meaningful activity within the widest range of civic, cultural, educational and training and recreational opportunities;
- \* efficient community services, including access to low cost transportation, which provide a choice in supported living arrangements and social assistance in a coordinated manner and which are readily available when needed, with emphasis on maintaining a continuum of care for the vulnerable older individuals;
- \* immediate benefit from proven research knowledge which can sustain and improve health and happiness; and

- \* freedom, independence, and the free exercise of individual initiative in planning and managing their own lives, full participation in the planning and operation of community-based services and programs provided for their benefit, and protection against abuse, neglect, and exploitation.

## **Targeting of Services**

The Older Americans Act, as amended in 2006, reemphasized the intention of the Congress to target services and resources on the needs and problems of those older individuals identified as having the greatest economic need, the greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). Special emphasis has been placed on using outreach methods to target services to:

- \* older individuals residing in rural areas;
- \* older individuals with greatest economic needs (with particular attention to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas);
- \* older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas );
- \* older individuals with severe disabilities;
- \* older individuals with limited English-speaking ability;
- \* older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
- \* older individuals at risk for institutional placement.

## **Chapter 349 Hawaii Revised Statutes Goals**

Act 225, SLH 1974 mandated the State Commission on Aging to develop a Comprehensive Master Plan for the Elders. This plan appeared in 1975, and provided the framework for program administrators, legislators, and members of the community to guide the development of systems-based coordinated policies and programs for Hawaii's elderly population. Subsequently, the *Comprehensive Master Plan for the Elderly: Update 1988* was adopted by the State Legislature in 1988. It serves as a blueprint for policy and program decisions for Hawaii's older adults.

At the same time in 1988, the *Long Term Care Plan for Hawaii's Older Adults* was adopted by the State Legislature. It guides the State in the development, coordination and enhancement of long term care policies and programs.

## EXHIBIT N-1: Prioritization of Issues and Services

A committee was formed, comprised of members from the Agency on Elderly Affairs' Advisory Council and AEA staff. Members of the Advisory Council included elderly consumers, members of the community at large, and representatives of service organizations and agencies. The prioritization process involved the use of a prioritization worksheet completed by each committee member. Members were given background information in advance to acquaint them with the criteria used in ranking priority issues:

✓ **Older Americans Act**

Service areas were ranked on their relative importance, according to the Older Americans Act objectives and priorities [Section 306(a)(2)], which includes the identified Title III B priority areas: access, in-home, and legal.

✓ **Targeted Population Served**

Members rated each service according to prior year service levels as reported in agency quarterly reports. The criteria for targeted population are those elderly served who were in greatest economic need, greatest social need, low income minority, and older individuals residing in rural areas.

✓ **Priority Issues**

Members rated each service according to the issues and areas of concern identified from the AEA needs assessment conducted (surveys, focus groups, secondary data and service utilization review) and the committee member's perceived need in the community.

✓ **Potential Cost Benefit**

Members rated services based on the perceived cost benefit, including unit cost of services provided (cost reimbursed by Agency on Elderly Affairs to service providers).

✓ **Probability of Service Success**

Members rated each service according to current demand, as determined by current service levels and prior year service levels as reported in the quarterly reports.

The committee members prioritized the importance of each service provided by AEA. The results are in Exhibit N-3.

## **EXHIBIT N-2: The Strategies to Meet Issues**

- 1) The Kaua'i Agency on Elderly Affairs' (AEA) Information and Referral (I & R) component is in integral part of the Area Agency. Community Service Program Assistants are assigned to designated districts on the island and conduct home visits to provide information to older adults and families. Each staff person is equipped with laptops and wireless remote internet access to provide enhanced services to older adults and families and facilitate access to the Aging & Disability Resource Center (ADRC) website to gather information about available services and programs.
- 2) The AEA I & R component will also conduct outreach activities in the community to identify older adults who may be in need of services.
- 3) The AEA has an Advisory Council comprised of older adults and agency representatives who can offer advice, technical assistance, and partnership to address the future issues of our aging population. There is representation from a cross-section of the community, including those who work or have experience with the low income and minority population, Native Hawaiian population, long term care industry, and grandparents who are caring for grandchildren.
- 4) The AEA will identify opportunities to coordinate, collaborate and establish partnerships with local individuals, agencies and organizations, including service providers on client referrals, service delivery, and issues relating to supporting Kaua'i's older adults.
- 5) The AEA will identify key partners to facilitate collaboration and coordination for the ADRC.
- 6) The AEA will continue to coordinate, collaborate and establish partnerships with local individuals, agencies and organizations to plan and implement two evidence-based disease prevention programs called EnhanceFitness and the Chronic Disease Self-Management Program, also known as Better Choices, Better Health, through Kaua'i's Healthy Aging Project partnership.
- 7) The AEA will identify opportunities to advocate on behalf of Kaua'i's older adults in areas to support aging in place.
- 8) The AEA will encourage staff participation on advisory boards for local agencies and organization to have an opportunity to provide input on behalf of Kaua'i's older adults.
- 9) The AEA will provide capacity-building activities for staff and service providers to develop their skills and capacity to provide services for older adults, caregivers and persons with disabilities.

### EXHIBIT N-3: The Prioritization of Services for Funding

A sub-committee comprised of AEA staff and Advisory Council members reviewed pertinent information on current services and prioritized these services. Services are presented in the order of their priority/importance:

List of Programs and Services	Criteria			Potential Resources			
	Title III	GEN, GSN, LIM, OIRA	Priority Needs	OAA	State	County	Other
Health Promotion Activities	x	x	Y	x		x	x
Kupuna Care Transportation	x		Y				
Information & Assistance, Outreach	x		Y	x		x	
Caregiver Information, Services, Support	x		Y	x			
Meals- Home- Delivered, Congregate	x		Y	x			x
Case Management, In-home Services	x	x	Y		x		
Legal Assistance	x	x	Y	x			
Volunteer Opportunities	x		Y			x	x

\*Title III priorities are met (services associated with access to services, in-home services, and legal assistance)

\*Older individuals with greatest economic need (GEN) and other individuals with greatest social need (GSN), low-income minority (LIM) individuals, and older individuals residing in rural areas (OIRA) are served

\*Priority needs are addressed, Y=Yes; N=No

## **EXHIBIT O-1: PART III. Action Plans**

### **Summary of Goals**

**Summary of Goals:** The State and Area Agencies on Aging are pursuing the following goals and strategies:

**Goal 1:** Maximize opportunities for older adults to age well, remain active, and enjoy quality lives while engaging in their communities

**Strategy 1-1:** Promote Healthier living through evidence-based programs and volunteerism.

**Goal 2:** Forge partnerships and alliances that will give impetus to meeting Hawaii's greatest challenges of the aging population.

**Strategy 2-1:** Expand and strengthen access to services with the Aging Network.

**Strategy 2-2:** Increase the quality of life for older adults and persons with disabilities living in the community.

**Goal 3:** Strengthen the statewide ADRC system for persons with disabilities, older adults, and their families.

**Strategy 3-1:** Promote and strengthen the ADRC system process.

**Goal 4:** Enable older adults to live in their communities through the availability of and access to high quality long term services and supports (LTSS), including supports for their families and caregivers.

**Strategy 4-1:** Promote and expand innovative programs that meet the needs of older adults and their caregivers.

**Strategy 4-2:** Pursue and promote a person-centered system that meets the needs of older adults and their caregivers.

**Goal 5:** Optimize the health, safety and independence of Hawaii's older adults.

**Strategy 5-1:** Expand and foster collaboration with the Aging Network to ensure older adults and persons with disabilities live safely and independently.

## EXHIBIT O-2: Summary of Objectives

Goal	Objectives
<b>1. Maximize opportunities for older adults to age well, remain active, and enjoy quality lives while engaging in their communities.</b>	1-1 Increase the number of volunteers in the Healthy Futures focus area to 35% by October 2021.
Strategy 1-1: Promote Healthier living through evidence-based programs and volunteerism.	1-2 Offer five (5) Better Choices Better Health Program (BCBH) workshops each year.
<b>2. Forge partnerships and alliances that will give impetus to meeting Hawaii's greatest challenges of the aging population.</b>	2-1 By October 2021, re-establish Interdisciplinary Team (IDT) meetings with in-home service providers, government agencies and other network organizations and partners
Strategy 2-1: Expand and strengthen access to services with the Aging Network.	2-2 AEA's service provider organizations, other partner organizations in the Aging Network, and government agencies will become Dementia Friends by September 30, 2020.
Strategy 2-2: Increase the quality of life for older adults and persons with disabilities living in the community.	
<b>3. Strengthen the statewide ADRC system for persons with disabilities, older adults, and their families.</b>	3-1 Establish semi-annual information meetings with service contractors, by July 2020.
Strategy 3-1: Promote and strengthen the ADRC system process.	3-2 Increase the number of ADRC website visits 20% annually.

<b>4. Enable older adults to live in their communities through the availability of and access to high quality long-term services and supports (LTSS), including supports for their families and caregivers.</b>	4-1 Expand educational opportunities for older adults and caregivers.
Strategy 4-1: Promote and expand innovative programs that meet the needs of older adults and their caregivers.  Strategy 4-2: Pursue and promote a person-centered system that meets the needs of older adults and their caregivers.	4-2 Expand the multi-contract procurement for solicitation for Title III and Kupuna Care services by September 2021.
<b>5. Optimize the health, safety and independence of Hawaii's older adults.</b>	5-1 Increase the number of older adults referred to the Falls Prevention Program by 5% annually.
Strategy 5-1: Expand and foster collaboration with the Aging Network to ensure older adults and persons with disabilities live safely and independently.	5-2 Expand private hire list to include yard maintenance, home repair and private shopper services, by 2021.
	5-3 Promote awareness and advocacy of elder abuse through workshops, outreach, and informational materials.



## EXHIBIT O-3: Objectives and Action Plans

### Statement of Objective (# 1-1)

Increase the number of volunteers in the Healthy Futures focus area to 35%, by October 2021.

### Reference to Priority

#### OAA 306(a)(6)(c)(iii)

Provide that the area agency on aging will –

iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |                                 |
|--|---------------------------------|
| 1. Explore and/or develop a Telephone Reassurance training program and procedures. | February 2020                   |
| 2. Conduct annual volunteer recruitment event.                                     | March 2020;<br>Spring, annually |
| 3. Train RSVP volunteers for the Telephone Reassurance Program.                    | April 2020                      |
| 4. Collaborate with Case Management to identify volunteer opportunities.           | April 2020;<br>On going         |
| 5. Develop and conduct satisfaction surveys for volunteers.                        | Annually                        |

### Outcome(s):

35% of RSVP volunteers in Healthy Futures focus areas

85% of RSVP volunteers express satisfaction in remaining active and socially engaged through volunteerism.

### Effectiveness Measure(s)

# of active RSVP volunteers in Healthy Futures Focus Area

# of active RSVP volunteers

# of RSVP volunteers expressing satisfaction in their volunteer work.

## Objectives and Action Plans

### Statement of Objective (# 1-2)

Offer five (5) Better Choices Better Health Program (BCBH) workshops each year.

### Reference to Priority

#### OAA 306(a)(7)(c)

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

(C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals.

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |          |
|--|----------|
| 1. Conduct presentations about the BCBH program at community-based settings where workshops have not been offered. | On going |
| 2. Secure sites, schedule workshops and coordinate/assign lay leaders to workshops.                                | On going |
| 3. Promote workshops through County news releases, flyers and local media.   | On going |

### Outcome(s):

85% of participants indicated they are confident to manage their chronic health problems.  
60 participants completed the course.

### Effectiveness Measure(s)

# total of workshops held  
# total of participants who completed course  
client satisfaction survey

## Objectives and Action Plans

### Statement of Objective (# 2-1)

By October 2021, re-establish IDT meetings with in-home service providers, government agencies and other network organizations and partners.

### Reference to Priority

#### OAA 306(a)(7)

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

### Major Action Steps to Achieve Objectives

### Completion Date

- |   |               |
|---|---------------|
| 1. Identify potential, in-home service providers, government agencies, network organizations and partners appropriate to participate in an Inter-disciplinary Team. | December 2019 |
| 2. Establish a protocol with interested partners.   | March 2020    |
| 3. Draft and execute a Memorandum of Understanding with each IDT partner organization.  | May 2020      |
| 4. Collaborate and execute Memorandum of Understanding with other appropriate in-home service providers and government agencies.                                    | On going      |

### Outcome(s):

75% of identified partners will participate in activities of the IDT team

### Effectiveness Measure(s)

# identified partners

# in-home service providers with signed MOUs

Written protocol and procedures have been developed and implemented

# referrals

## Objectives and Action Plans

### Statement of Objective (# 2-2)

AEA's contracted service provider organizations, other partner organizations in the Aging Network, and government agencies will become Dementia Friends by September 30, 2020.

### Reference to Priority

#### OAA 306(a)(2)

(2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

- (B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction;

### Major Action Steps to Achieve Objectives

### Completion Date

- |   |               |
|---|---------------|
| 1. County of Kaua'i Agency on Elderly Affairs staff will receive Dementia Friends certificates.                                     | On going      |
| 2. Conduct a Dementia Friendly Symposium for service providers, partner organizations in the Aging Network and government agencies. | December 2019 |
| 3. Conduct a Dementia Friends Champion Training session.  | December 2019 |
| 4. Conduct Dementia Friends information sessions.   | On-going      |

### Outcome(s):

100% of AEA contracted service provider organizations will have participated in a Dementia Friends information session.

85% of participants of Dementia Friends sessions indicate they have increased their awareness about Alzheimer's and other related dementia.

85% of participants of Dementia Friends sessions indicate they will likely adopt dementia friendly practices in their personal or professional life.

### Effectiveness Measure(s)

# of contracted service provider organizations

# of contracted service provider organizations who have participated in a Dementia Friends information session.

Dementia Friends Information Session Evaluation

## **Objectives and Action Plans**

### **Statement of Objective (# 3-1)**

Establish semi-annual information meetings with service contractors, by July 2020.

### **Reference to Priority**

#### **OAA 306(a)(7)**

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

### **Major Action Steps to Achieve Objectives**

### **Completion Date**

- |   |  |
|---|--|
| 1. Conduct Semi-Annual Contractors Meeting.   | July 2020,<br>February 2021;<br>annually |
| 2. Develop Service Contractors Evaluation and distribute.   | November 2019;                           |
| 3. Develop Client Satisfaction Survey on Service Provider's service and distribute to service recipients. | August 2020;<br>annually                 |

### **Outcome(s):**

80% Service Contractors will gain knowledge and a better understanding of the ADRC network.  
85% Service Recipients will indicate their quality of life has improved since receiving services.

### **Effectiveness Measure(s):**

Service Contractors Evaluation

Client Satisfaction Survey on Service Contractors

## Objectives and Action Plans

### Statement of Objective (# 3-2)

Increase the number of ADRC website visits by 20%, annually.

### Reference to Priority

#### OAA 306(a)(1)

Provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, or construction of multipurpose senior centers, within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income or individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community, evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need.

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |              |
|--|--------------|
| 1. Update the ADRC website resource database.                        | January 2020 |
| 2. Redesign ADRC website to be user and mobile friendly.             | October 2021 |
| 3. Facilitate monitoring the effectiveness of the resource Database. | On-going     |

### Outcome(s):

60% of ADRC users will express satisfaction with Kaua'i ADRC website resource database.  
60% of ADRC users will express satisfaction with finding information they are seeking.

### Effectiveness Measure(s):

#ADRC website users expressing satisfaction with the resource database  
#ADRC website users expressing satisfaction with finding information  
#ADRC website visits

## Objectives and Action Plans

### Statement of Objective (# 4-1)

Expand educational opportunities for older adults and caregivers.

### Reference to Priority

#### **OAA 306(a)(2) (A)**

(2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance, and case management services)

### Major Action Steps to Achieve Objectives

### Completion Date

- |   |                            |
|---|----------------------------|
| 1. Identify and coordinate educational workshops opportunities<br>In the community for older adults and caregivers. | January 2020               |
| 2. Plan and collaborate with appropriate resource to conduct<br>training workshops, demonstrations, presentations.  | February 2020;<br>annually |
| 3. Evaluate effectiveness of workshop/training.   | October 2020;<br>annually  |

### Outcome(s):

75% of workshop/training participants will express an increase in their knowledge of caregiver coping strategies, stress management and resource information.

75% of workshop/training participants will express satisfaction with meeting their individual expectations.

### Effectiveness Measure(s):

# participants attending workshops/training presentations

# participants expressing an increase in their knowledge of caregiver coping strategies, stress management and resource information.

# participants expressing satisfaction with the education received.

## Objectives and Action Plans

### Statement of Objective (# 4-2)

Expand the multi-contract procurement for solicitation for Title III and Kupuna Care services by September 2021.

### Reference to Priority

#### OAA 306(a)(1)

Provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, or construction of multipurpose senior centers, within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income or individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community, evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need.

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |                                       |
|--|---------------------------------------|
| 1. Identify districts in the community that do not have a congregate meal site.  | November 2019                         |
| 2. Explore options for congregate meal service available in the underserved districts.   | December 2019                         |
| 3. Identify potential meal providers for a congregate meal program in the underserved areas and conduct an Invitation for Bid (IFB). | January 2020                          |
| 4. Prepare and issue contract with successful meal provider bidder.  | May 2020                              |
| 5. Monitor program for compliance.   | Within 3-6 months of start of service |
| 6. Explore assisted transportation service options.  | August 2020                           |



- |   |                                       |
|---|---------------------------------------|
| 7. Explore feasibility of a pilot program.  | September 2020                        |
| 8. Identify potential assisted transportation providers for a pilot program and conduct an IFB. | October 2020                          |
| 9. Prepare and issue contract with successful bidder assisted transportation provider.          |                                       |
| 10. Monitor program for compliance.   | Within 3-6 months of start of service |

**Outcome(s):**

80% of clients receiving congregate meals expressed it is their most nutritional meal.  
 80% of clients receiving congregate meals enjoy the socialization.  
 80% of clients of receiving assisted transportation expressed they are satisfied with the travel time to and from their appointment.  
 80% of clients expressed the service allowed them to remain independent in the community.

**Effectiveness Measure(s)**

# of clients attending congregate meals pilot program.  
 # of clients attending congregate meals enjoy the socialization.  
 # of clients enrolled in assisted transportation pilot program.  
 # of clients who have experienced less wait time.  
 Satisfaction Survey for participants of congregate meal pilot program.  
 Satisfaction Survey for participants of assisted transportation pilot program.

## Objectives and Action Plans

### Statement of Objective (# 5-1)

Increase the number of older adults referred to the Falls Prevention Program by 5% annually.

### Reference to Priority

#### OAA 306(a)(7)(c)

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

(C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals.

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |              |
|--|--------------|
| 1. Identify districts that are underserved by the Falls Prevention Program, indicated by the number of older adults who Participated in the program.       | October 2019 |
| 2. Identify opportunities in each district for Outreach events.  | On-going     |
| 3. Plan, coordinate and conduct presentations, information tables, workshops with coalition partners Kaua'i Fire Department and American Medical Response. | On-going     |
| 4. Three month follow-up evaluation.   | On-going     |

### Outcome(s):

85% of participants experienced a decrease in falls after 3 months.

85% of participants are able to live independently longer in their home and community.

### Effectiveness Measure(s)

# total falls experienced by participants within 3 months of participating in the Falls Prevention Program.

# total falls experienced by participants 3 months after participating in Falls Prevention Program.

# total of referrals to the Falls Prevention Program annually.

3 month Follow-up Evaluation

## Objectives and Action Plans

### Statement of Objective (# 5-2)

Expand private hire list to include yard maintenance, home repair and private shopper services by 2021.

### Reference to Priority

#### OAA 306(a)(7)(B)(iii)

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system, for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –

(B) Conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better –

(iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings.

### Major Action Steps to Achieve Objectives

### Completion Date

- |   |                             |
|---|-----------------------------|
| 1. Explore resources for licensed contractors for home repairs, and yard maintenance services.  | March 2020                  |
| 2. Explore with resources for private shopper services.   | March 2020;                 |
| 3. Identify and interview licensed contractors, yard maintenance services, private shoppers.  | March 2020;<br>On-going     |
| 4. Request 3 letters of recommendation and evidence of appropriate professional license, if applicable. Include on private hire list. | April 2020;<br>On-going     |
| 5. Develop Client Satisfaction Survey and distribute.   | After 6 months;<br>Annually |

### Outcome(s):

60% clients are satisfied with the service by the private hire contractor/service provider.

60% clients indicate they are able to remain living in the community.

### Effectiveness Measure(s)

Client Satisfaction Survey

# clients satisfied with the private-hire service

# clients who continue to live in their home

# total clients who have used the private-hire list

## Objectives and Action Plans

### Statement of Objective (# 5-3)

Promote awareness elder abuse through workshops, outreach, and informational materials.

### Reference to Priority

#### OAA 306(a)(7)

Provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community based settings, in a manner responsive to the needs and preferences of older individuals and persons with disabilities and their family caregivers, by –

- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

### Major Action Steps to Achieve Objectives

### Completion Date

- |  |                         |
|--|-------------------------|
| 1. Explore models of elder abuse coalitions, elder abuse multi-disciplinary teams (MDT), other models or programs. | June 2020               |
| 2. Identify partners for a coalition, MDT or other model or program.   | September 2020          |
| 3. Collaborate with partners on a draft protocol and establish working relationships with partners.                | December 2020           |
| 4. Develop and distribute MOUs to partners for signatures.   | March 2021;<br>On-going |
| 5. Conduct presentations about Elder Abuse at Community Centers  | May 2021                |
| 6. Develop Elder Abuse Information Session Evaluation and distribute   | May 2021;<br>On-going   |

### Outcome(s):

Lessen the potential harm on vulnerable dependent/adult abuse victims.

85% indicate they have increased their knowledge/awareness of elder abuse.

85% feel confident to recognize signs of elder abuse.

85% know where to report suspected elder abuse.

### Effectiveness Measure(s)

# suspected adult abuse referrals/reports to Adult Protective Services

# referrals to service providers, agencies, organizations

# total contacts at workshops, outreach events

**EXHIBIT P-1: Targeting Services -- The Next Four Years**

**I. Methods for Assuring Service Preference to Older Individuals, People with Disabilities, and their Caregivers, with the Greatest Economic Need**

**Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, shall prepare and develop an area plan for the next four years which shall provide assurances that the Kauai Agency on Elderly Affairs will set specific objectives for providing services to older individuals, people with disabilities, and their caregivers, with greatest economic need. No means test shall be used to qualify any individual for services supported with funds from the Administration on Aging.

**Definition**

**Greatest Economic Need:** The need resulting from an income level at or below the poverty line. [OAA, Sec. 102 (27)].

**Methods**

- 1) The Kauai Agency on Elderly Affairs' (AEA) Information and Referral staff will conduct outreach activities at elderly and public housing facilities and various locations in the community to identify those older adults, people with disabilities, and their caregivers, in greatest economic need, who may be in need of services or assistance.
- 2) The AEA's Information and Referral (I & R) staff will identify those in greatest economic need through visits conducted in the home of older adults and people with disabilities.
- 3) The AEA's I & R staff will participate in capacity-building activities and training under the Medicare Improvements for Patients and Providers Act (MIPPA) and Medicare Beneficiary Outreach and Assistance for Low-Income Assistance and Enrollment. I & R will also coordinate and collaborate with agencies who assist clients with Medicare Part D enrollment, such as the Hawaii SHIP program.
- 4) The AEA will conduct public education/media activities to reach those older adults, people with disabilities, and their caregivers, in greatest economic need.
- 5) Partnerships will be developed by the AEA with community agencies who provide services to those in greatest economic need and have experience in working with such target groups to distribute brochures and other information.

- 6) The AEA will identify and invite agency representatives who provide services to those in greatest economic need to participate on AEA's Advisory Council and other committees.
- 7) The AEA will coordinate and collaborate with agencies on mutual client referrals and linkages and to maximize service delivery. These agencies may include Kauai Economic Opportunity, Inc., Dept. of Human Services, and Catholic Charities.
- 8) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils with agencies who target older adults, people with disabilities, and their caregivers, in greatest economic need.
- 9) The AEA will encourage local businesses, civic organizations and service clubs to provide service projects and social support to those in greatest economic need, which may include Zonta Club of Kaua'i's Annual Christmas Fund and continued collaboration with Kaua'i Island Utility Cooperative (KIUC) to provide free refrigerators to older adults in need.
- 10) The AEA will continue to participate and support community events such as educational health fairs and informational presentations to provide information on available resources.

## **II. Methods for Assuring Service Preference to Older Individuals, People with Disabilities, and Their Caregivers, with the Greatest Social Need**

### **Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, shall prepare and develop an area plan for the next four years which shall provide assurances that the Kauai Agency on Elderly Affairs will set specific objectives for providing services to older individuals, people with disabilities, and their caregivers, with greatest social need. No means test shall be used to qualify any individual for services supported with funds from the Administration on Aging.

### **Definition**

**Greatest Social Need:** The need caused by non economic factors, which include: (A) physical and mental disabilities; (B) language barriers; and (C) cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that: (i) restricts the ability of an individual to perform normal daily tasks; or (ii) threatens the capacity of the individual to live independently. [OAA, Sec. 102 (28)].

### **Methods**

- 1) The Kauai Agency on Elderly Affairs' (AEA) Information and Referral staff will identify areas within the community that may be isolated and pose challenges for older adults, people with disabilities, and their caregivers to access services.

- 2) The AEA's Information and Referral staff will conduct outreach at elderly and public housing facilities to identify those seniors, people with disabilities, and their caregivers, in greatest social need who may have difficulty in accessing services.
- 3) The AEA I & R staff will continue to conduct outreach efforts in the community to identify those who may be socially isolated and in need of services.
- 4) The AEA will conduct public education/media activities to reach those older adults, people with disabilities, and their caregivers, in greatest social need.
- 5) The AEA and its service providers will make efforts to hire and recruit bilingual staff who are able to communicate with minority elderly, people with disabilities, and their caregivers, with language barriers or who speak or understand limited English.
- 6) Agency representatives who service older adults, people with disabilities, and their caregivers, in greatest social need are invited to participate on the AEA Advisory Council and other committees.
- 7) The AEA will develop partnerships and coordinate and collaborate with agencies and organizations to target those in greatest social need and maximize service delivery. These agencies may include churches, clinics, and other agencies and organizations that provide services to the disability population, homebound older adults, and/or older adults and people with disabilities, with language barriers.
- 8) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils with agencies who target older adults, people with disabilities, and their caregivers, in greatest social need.
- 9) The AEA will continue to provide support to the Kaua'i APS Multidisciplinary Team to target those older adults and people with disabilities who are frail and vulnerable and may need assistance in accessing services.
- 10) The AEA staff will seek capacity-building opportunities to develop skills in identifying those older adults and people with disabilities who may be vulnerable and at-risk for elder abuse.

### **III. Methods for Providing Services to Older Individuals and People with Disabilities At-Risk for Institutional Placement**

#### **Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, shall prepare and develop an area plan for the next four years which shall provide assurances that the Kauai Agency on Elderly Affairs will set specific objectives for providing services to older individuals and people with disabilities at risk for institutional placement. No means test shall be used to qualify any individual for services supported with funds from the Administration on Aging.

#### **Definition**

With respect to an older individual or a person with disabilities, that such individual is unable to perform at least two activities of daily living without substantial human assistance (including verbal reminding, physical cuing, or supervision) and is determined by the State to be in need of placement in a long-term care facility. (OAA, Sec. 101, (a) 45)

### **Methods**

- 1) The Kauai Agency on Elderly Affairs' (AEA) Information and Referral staff will identify areas within the community that may be isolated and pose challenges for older adults and people with disabilities who are frail to access services.
- 2) The AEA Information & Referral (I & R) staff will continue outreach efforts in the community to identify older adults and people with disabilities who may be at-risk for institutionalization and in need of services.
- 3) The AEA will conduct public education/media activities to reach those older adults and people with disabilities at risk for institutionalization and their families and caregivers who may need assistance.
- 4) The AEA's Case Management component will identify older adults and persons with disabilities who may be at-risk of institutionalization through its initial assessment process and develop care plans as appropriate and collaborating with appropriate agencies.
- 5) The AEA will develop partnerships and coordinate and collaborate with agencies and organizations to maximize service delivery and target those older adults and people with disabilities who may be frail and in need of services. These agencies may include churches, clinics, hospitals, and other agencies and organizations that provide services to people with disabilities and frail, homebound older adults.
- 6) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils with agencies who target older adults and people with disabilities at risk for institutionalization.

## **IV. Methods for Assuring Service Preference to Low Income Minority Older Individuals and People with Disabilities, and Their Caregivers**

### **Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, shall prepare and develop an area plan for the next four years which shall provide assurances that the Kauai Agency on Elderly Affairs will set specific objectives for providing services to low income minority older individuals, people with disabilities, and their caregivers.

### **Definitions**

1. **Low Income** means having an income at or below the federal poverty level. It is



the same as "greatest economic need."

2. **Minority** elders are persons age 60+, people with disabilities, and their caregivers who are either: American Indian/Alaskan Native; Asian Pacific Islander; Black, not of Hispanic origin; or Hispanic.
3. **Low-Income Minority** elders are persons age 60+, people with disabilities, and their caregivers, who are either: American Indian/Alaskan Native; Asian/Pacific Islander; Black, not of Hispanic origin; or Hispanic, with an annual income at or below the established poverty level.

### **Methods**

- 1) The Kauai Agency on Elderly Affairs' (AEA) Information and Referral staff will conduct home visits within designated areas to determine needs of older adults, people with disabilities, and their caregivers, and provide information on available services and resources.
- 2) The AEA Information and Referral staff will conduct outreach at elderly and public housing facilities to identify older adults, people with disabilities and their caregivers, in need of services or assistance.
- 3) The AEA's I & R staff will participate in capacity-building activities and training under the Medicare Improvements for Patients and Providers Act (MIPPA) and Medicare Beneficiary Outreach and Assistance for Low-Income Assistance and Enrollment. I & R will also coordinate and collaborate with agencies who assist clients with Medicare Part D enrollment, such as the Hawaii SHIP program.
- 4) The AEA will provide public education/media activities to reach those older adults, people with disabilities, and their caregivers, who are low-income and minority, including efforts to provide information in other languages.
- 5) The AEA will identify and invite agency representatives who service older adults, people with disabilities, and their caregivers, who are low-income and minority to participate on the AEA Advisory Council and other committees.
- 6) The AEA will develop partnerships and coordinate and collaborate with agencies to target those older adults, people with disabilities, and their caregivers, who are low-income and minority, and maximize resources. These partnerships may include clinics, cultural organizations, Kauai Economic Opportunity, Inc., Catholic Charities, and the Dept. of Human Services.
- 7) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils with agencies who target those who are low-income and minority.
- 8) The AEA will encourage service clubs, individuals, and the private sector to conduct service projects and/or funding to low-income minority individuals.
- 9) The AEA and its service providers will make efforts to hire and recruit bilingual staff that is able to communicate with minority elderly, people with disabilities, and their caregivers, who speak or understand limited English.
- 10) The AEA will encourage service providers to participate in cultural activities to identify those who are low-income and minority and may be in need of services.

## **V. Methods for Providing Services to Older Individuals, People with Disabilities, and**

## **Their Caregivers, with Limited English Proficiency**

### **Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, shall prepare and develop an area plan for the next four years which shall provide assurances that the Kauai Agency on Elderly Affairs will set specific objectives for providing services to older individuals, people with disabilities, and their caregivers, with limited English proficiency. No means test shall be used to qualify any individual for services supported with funds from the Administration on Aging.

### **Definition**

HRS Sec. 321C-2: “an individual who, on account of national origin, does not speak English as the person’s primary language and self identifies as having a limited ability to read, write, speak or understand the English language.”

### **Methods**

- 1) The Kauai Agency on Elderly Affairs’ (AEA) Information and Referral staff will conduct home visits within designated areas to determine needs of older adults, people with disabilities, and their caregivers, and provide information on available services and resources.
- 2) The AEA Information and Referral staff will conduct outreach at elderly and public housing facilities to identify older adults, people with disabilities, and their caregivers, in need of services or assistance.
- 3) The AEA will make efforts to provide public education/media activities to reach those older adults, people with disabilities, and their caregivers, who have limited English proficiency.
- 4) Agency representatives who provide services to older adults, people with disabilities, and their caregivers, with limited English proficiency are invited to participate on the AEA Advisory Council and other committees.
- 5) The AEA will continue to develop partnerships and coordinate and collaborate with agencies to maximize service delivery. These partnerships may include clinics, cultural organizations, Kauai Economic Opportunity, Inc., Catholic Charities, the Dept. of Health, and the Dept. of Human Services.
- 6) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils with agencies who have the experience and target those who have limited English proficiency.
- 7) The AEA and its service providers will make efforts to hire and recruit bilingual staff that is able to communicate with those who speak or understand limited English.
- 8) The AEA will encourage service providers to participate in cultural activities to identify those with limited English proficiency and may be in need of services.

## **VI. Methods for Assuring Service Preference to Older Individuals, People with Disabilities, and their Caregivers, Residing in Rural Areas**

### **Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, will provide assurances that its outreach efforts will identify individuals eligible for assistance under this Act, with special emphasis on older individuals, people with disabilities, and their caregivers, residing in rural areas.

### **Definitions**

**Older Individual:** An individual who is 60 years of age or older. [OAA, Sec. 102 (35)].

**Disability:** (Except when such term is used in the phrase “severe disability”, “developmental disabilities”, “physical or mental disability”, “physical and mental disabilities”, or “physical disabilities”) a disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in 1 or more of the following areas of major life activity: (A) self care, (B) receptive and expressive language, (C) learning, (D) mobility, (E) self-direction, (F) capacity for independent living, (G) economic self-sufficiency, (H) cognitive functioning, and (I) emotional adjustment. (OAA, Sec 102 (8)).

**Caregiver:** An adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer’s disease or a related disorder with neurological and organic brain dysfunction. (OAA, Sec 302 (4)).

**Rural:** An area that is not urban.

Definition: Beginning in FY 97, the Administration on Aging definition of rural for purposes of SPR reporting: A rural area is any area that is not defined as urban. Urban areas comprise (1) urbanized areas (a central place and its adjacent densely settled territories with a combined minimum population of 50,000) and (2) an incorporated place or a census designated place with 20,000 or more inhabitants.

### **Methods**

- 1) The Kauai Agency on Elderly Affairs’ Information and Referral staff will conduct home visits within designated areas to determine needs of older adults, people with disabilities, and their caregivers, and provide information on available services and resources.
- 2) The Kauai Agency on Elderly Affairs’ Information and Referral staff will conduct outreach at elderly and public housing facilities to identify those seniors, people with disabilities, and their caregivers, in need of services or assistance.
- 3) The AEA will provide public education/media activities to reach older adults, people with disabilities, and their caregivers.

- 4) Agency representatives who service older adults, people with disabilities, and their caregivers, are invited to participate on the AEA Advisory Council and other committees.
- 5) The AEA will develop partnerships and coordinate and collaborate with agencies to maximize resources. These partnerships may include the County Dept. of Parks and Recreation, Kauai Economic Opportunity, Inc., Catholic Charities, the Dept. of Health, and the Dept. of Human Services.
- 6) The AEA staff will be encouraged to participate on local boards, committees, and advisory councils to provide information and advocacy on behalf of older adults, people with disabilities, and their caregivers.
- 7) The AEA will encourage service clubs, individuals, and the private sector to conduct service projects and/or funding for older adults, people with disabilities, and their caregivers, within the community.
- 8) The AEA and its service providers will make efforts to hire and recruit bilingual staff that is able to communicate with rural, minority elderly, people with disabilities, and their caregivers who speak or understand limited English or are geographically isolated.
- 9) The AEA will participate and encourage service providers to participate in community events to promote services.

**VII. Methods to Increase Access by Older Individuals, People with Disabilities, and Their Caregivers, who are Native Americans (American Indians, Alaskan Natives, and Native Hawaiians)**

**Declaration of Compliance**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging. The Area Agency on Aging, namely the Kauai Agency on Elderly Affairs, will provide assurances that its outreach efforts will identify individuals eligible for assistance under this Act, with special emphasis on older individuals, persons with disabilities, and their caregivers, who are Native Americans (American Indians, Alaskan Natives, and Native Hawaiians).

**Definitions**

**Native American:** Refers to American Indians, Alaskan Natives, and Native Hawaiians. (OAA, Sec. 601).

**American Indian or Alaskan Native:** A person having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition. (Instructions for Completion of Title III and VII SPR).

**Native Hawaiian:** Any individual any of whose ancestors were natives of the area that consists of the Hawaiian Islands prior to 1778. (OAA, Sec. 625).

**Methods**

- 1) The Kauai Agency on Elderly Affairs will provide information and assistance, and outreach efforts to identify individuals eligible for assistance under its Area Plan, with special emphasis on older American Indians, Alaskan Natives, and Native Hawaiians, and inform such individuals of the availability of available services.
- 2) The AEA will identify cultural events in the community and make efforts to participate and promote services.
- 3) The AEA will continue to develop partnerships with agencies that provide services or programs to older Native American individuals and will coordinate and collaborate on client referrals to maximize resources.
- 4) The AEA will continue to develop partnerships with agencies that provide services or programs to older Native American individuals, Native American individuals with disabilities, and their caregivers, to collaborate on community events and programs.
- 5) Agency representatives who service older adults, people with disabilities, and their caregivers, and have the experience of working with Native Americans are invited to participate on the AEA Advisory Council and other committees.

## EXHIBIT Q: Waiver to Provide Direct Service

### Waiver to Provide Direct Service

#### **KAUAI AGENCY ON ELDERLY AFFAIRS**

(Area Agency on Aging)

#### **JUSTIFICATION FOR AREA AGENCY'S DIRECT PROVISION OF SERVICE**

**For the period beginning April 1, 2019 through March 30, 2020**

#### **Service**

Retired and Senior Volunteer Program - RSVP

#### **Title III Reference**

OAA Sec.3026(a)(12) Each plan shall, in the discretion of the area agency on aging, provide for a Program Director, who shall encourage, organize, and promote the use of older individuals as volunteers to local communities within the area.

OAA Sec.3027(a)(8)(a) The plan shall provide that no supportive services, nutrition services, or in-home services will be directly provided by the area agency on aging in the State, unless, in the judgment of the State agency-- provision of such services by the area agency on aging is necessary to assure an adequate supply of such services; such services are directly related to such area agency on aging's administrative functions; or such services can be provided more economically, and with comparable quality, by such area agency on aging.

#### **Funding Source**

	<b><u>CNCS*</u></b>	<b><u>State</u></b>	<b><u>County</u></b>
	\$70,347	- 0 -	\$118,184
TOTAL \$188,531	<u>\$70,347</u>	- 0 -	<u>\$118,184</u>

\*CNCS (Other Federal) – Corporation for National and Community Service

#### **Justification**

- Kauai RSVP organizes and promotes volunteer opportunities for volunteers 55 years and older who seek to find challenging, rewarding and significant service opportunities in their local communities. RSVP member's interests matched with community needs and volunteer opportunities with government agencies, nonprofits, faith based, and other community organizations on Kauai. RSVP's primary focus is Healthy Futures – increasing seniors' ability to remain in their own homes with the same or improved quality of life for as long as possible,

increasing food security, improving access to health care and promoting good health. Other service areas include protecting and restoring the environment, tutoring children, assisting veterans, military service members, and their families, volunteering in thrift shops and hospitals, assisting in museums and doing special projects.

- The provision of RSVP services by the Agency on Elderly Affairs (AEA) is necessary to assure an adequate supply of such services. RSVP is an added resource for the AEA to provide services to the elderly, enhance its service delivery, and strengthen its infrastructure.
- These services are related to the Agency on Elderly Affairs' (AEA) administrative functions. The AEA, for the past 41 years, is the designated grantee organization and provides all in-kind support that may not be readily available through other community agencies.
- The RSVP component is the only program within the County of Kauai with a core of hundreds of experienced volunteers and a long-term history and record of experience on volunteerism since 1973. This grantee/grantor relationship has progressed over the years into a well-developed partnership, which significantly enhances elderly services through volunteerism and demonstrates that it has provided the service effectively and efficiently. This enhancement of elderly services is expected to increase as program changes at the Corporation for National & Community Services are streamlining the focus areas for RSVP volunteers to provide greater impact on the areas of greatest community need. The new focus areas are Healthy Futures, Education, Veterans and Military Families, Environmental Stewardship, Economic Opportunities, Disaster Services and Other Community Priorities.
- During FY 2019, 377 RSVP volunteers provided 33,719 hours of community service. The average value of volunteering in Hawaii is \$26.87/hour, as determined by Independent Sector, a coalition of nonprofits, foundations, and corporate philanthropy organizations. Based on this, the computed value contributed by Kauai's RSVP volunteers is at \$906,209.53.
- According to the RSVP Program Operation Handbook, "the RSVP sponsor is required to supplement the CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS) grant with other budget support to the fullest extent possible and at least equal in amount to the local support negotiated between CNCS and the sponsor." AEA, as the sponsoring agency, has continued to match the CORPORATION FOR NATIONAL AND COMMUNITY SERVICE grant with funds provided by the County.

This Exhibit must be renewed annually for each year the Area Agency wishes to provide any service directly.

## Waiver to Provide Direct Service

### **KAUAI AGENCY ON ELDERLY AFFAIRS**

(Area Agency on Aging)

### **JUSTIFICATION FOR AREA AGENCY'S DIRECT PROVISION OF SERVICE**

**For the period beginning July 1, 2019 through June 30, 2020**

#### **Service**

Evidence-based Programs: EnhanceFitness Program  
Chronic Disease Self-Management Program (CDSMP) –  
also known as Better Choices, Better Heal

#### **Title III Reference**

OAA Sec.3027(a)(8)(a) The plan shall provide that no supportive services, nutrition services, or in-home services will be directly provided by the area agency on aging in the State, unless, in the judgment of the State agency-- provision of such services by the area agency on aging is necessary to assure an adequate supply of such services; such services are directly related to such area agency on aging's administrative functions; or such services can be provided more economically, and with comparable quality, by such area agency on aging.

OAA Sec. 102(14)(D) **Disease Prevention and Health Promotion Services definition** refers to evidence-based health promotion programs, including programs related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity and improved nutrition.

#### **Funding Source**

	<b><u>AoA</u></b>	<b><u>County</u></b>	<b><u>State</u></b>
Enhance Fitness	\$ 8,983	\$114,211	0
CDMSP/DSMP	0	0	0
TOTALS \$123,194	<u>\$ 7,358</u>	<u>\$114,211</u>	<u>0</u>

AoA – U.S. Administration on Aging

County – County of Kauai

State – State of Hawaii

#### **Justification**

- The Older Americans Act amendments of 2006 directed the aging network at all levels, which includes the Area Agency on Aging, to actively promote the opportunity to enable older adults to live healthier lives through the delivery of evidence-based disease and disability prevention programs. One of these programs is EnhanceFitness, a physical activity program for older adults and



another is Better Choices, Better Health (BCBH), a Chronic Disease Self-Management Program. Both evidence-based programs have been researched, tested and proven to be effective in communities.

- The U.S Administration on Aging's Strategic Action Plan includes efforts to move forward changes in the long-term care system at the state and community levels. One of its priorities is building evidence-based prevention into our community based systems for services. These prevention programs help older people to make behavioral changes that will reduce their risk of disease, disability and injury, which can lead to increased healthcare costs.
  - EnhanceFitness is a nationally recognized, evidence-based program developed by the University of Washington and Senior Services in Seattle, Washington. It is a group exercise program designed for older adults to improve their overall functional fitness through classes held three times a week. The design of the program includes exercises to address balance, strength, endurance, and flexibility, and is geared to the level of both active and frail older adults.
- It is commonly recognized that regular physical activity in the older adult population can decrease the risk of developing high blood pressure, osteoporosis, heart disease, diabetes and depression or help to manage chronic disease and prevention of falls.
  - The provision of the EnhanceFitness program by the Kaua'i Agency on Elderly Affairs (AEA) is necessary to assure an adequate supply of these services, and is directly related to the area agency on aging's administrative functions. Providing these services enhances AEA's existing service delivery and coordinated system of community-based services for a wide spectrum of older adults.
  - BCBH is a nationally recognized, evidence-based program developed by Stanford University. It is a series of six weekly classes for persons with a chronic health condition, teaching them about goal setting and action planning, and discusses relevant topics including exercise, nutrition, and medication management.
  - The provisions of the BCBH program by the Kauai Agency on Elderly Affairs (AEA) is necessary to assure an adequate supply of these services, and is directly related to the area agency on aging's administrative functions. Providing this program enhances AEA's existing service delivery and coordinated system of community-based services to address the needs for a wide spectrum of older adults.
  - Since 2003, the AEA has worked in partnership on a statewide Healthy Aging Project committee with the State Executive Office on Aging and the State Dept. of Health, with the overall goal of improving the health status of older adults. Consequently, the AEA has implemented Healthy Aging activities on Kaua'i since 2004 and has developed partnerships on Kaua'i to collaborate and coordinate its efforts.

- In August, 2006, the AEA participated in a statewide effort to apply for Administration on Aging funding to implement evidence-based, disease prevention programs in Hawaii. Kauai received funding to implement the EnhanceFitness program in July, 2007 at two nutrition sites/senior centers. Interest in the program has led to the expansion of seven sites and nine classes throughout the community. In fiscal year 2009, Kauai received funding to implement the BCBH program.
- In 2011, the AEA received funds from the Department of Health and Human Services – Communities Putting Prevention to Work (CPPW), through the State Department of Health, to expand the EnhanceFitness program in Kapaa and train more BCBH workshop leaders and continue implementation of the workshops.
- AEA staff has provided the necessary oversight and has monitored the requirements of the program to maintain program fidelity and has provided the leadership for the Healthy Aging partnership development. AEA staff has also provided on-going in-kind support to assist with participant recruitment, registration, and Fitness Checks, which measures participants' progress in the program.

This Exhibit must be renewed annually for each year the Area Agency wishes to provide any

## EXHIBIT R: Waiver of Priority Categories of Services

County of Kaua'i Agency on Elderly Affairs

### JUSTIFICATION FOR WAIVER

### PRIORITY CATEGORIES OF SERVICES

For the duration of the Area Plan (FY 2019-2023)

The Area Agency on Aging is required to spend at least 40 percent of its Title III-B allotment in the priority categories of services, with some expenditures occurring in each category. If the Area Agency on Aging wishes to waive this requirement, it must identify the category of service which will be affected and provide a justification and documentation as required by Section 306(b). If the waiver is granted, the Area Agency on Aging certifies that it shall continue to expend at least 40 percent of its Title III-B annual allocation for the remaining priority categories of services.

#### Priority Service

#### Check Category Affected

**Access** (Transportation, Health Services, Outreach, and Information and Assistance, and Case Management Services)

N/A

**In Home Services** (including supportive Services for Families of Older Individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction).

N/A

**Legal Assistance**

N/A

#### Justification

**EXHIBIT S: PART IV. Funding Plan**  
**Previous Year Expenditures for Priority Services**  
**(FY 2018)**  
**Title III Part B Federal Funds Only**

In accordance with the Older Americans Act [Section 306 (a) (2)] the Area Agency is disclosing the amount of funds expended for each category of services during the fiscal year most recently concluded.

<b>Service</b>	<b>Compliance Amount (Dollars)</b>	<b>FY 18 Actual Expenditures</b>	<b>% for Title III Categories</b>
<b>ACCESS</b>			
<b>Information &amp; Assistance</b>	50,365	151,189	51%
<b>Outreach</b>	27,121	37,798	13%
<b>Sub-total</b>	<b>77,486</b>	<b>188,987</b>	<b>64%</b>
<b>SUPPORTIVE SERVICES: IN-HOME</b>			
<b>Fall Prevention</b>	5,960	785	0.27%
<b>Sub-total</b>	<b>5,960</b>	<b>785</b>	<b>0.27%</b>
<b>LEGAL</b>			
<b>Legal Assistance</b>	33,762	79,544	27%
<b>Sub-total</b>	<b>35,762</b>	<b>79,544</b>	<b>27%</b>
<b>Title III Part B Total</b>	<b>119,208</b>	<b>269,316</b>	

Compliance Amount – minimum amount required to be in compliance.

**EXHIBIT T-1: Planned Service Outputs  
and Resources Allocation Levels**

**Year 2020**

Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
<i>ACCESS</i>					
Information & Assistance	1,400	6,700 Contacts	\$42.00	\$93,264 \$188,536	NB S
Outreach	1,006	1,006 Contacts	\$70.00	\$23,316 \$47,134	NB S
Case Management	90	846 Hours	\$65.00	\$55,000	A
Transportation	130	15,100 Trips	\$8.34	\$125,934	A
<i>SUPPORTIVE SERVICES: IN-HOME</i>					
Homemaker	35	1,975 Hours	\$24.00	\$47,410	A
Personal Care	25	2,135 Hours	\$27.00	\$57,640	A
Adult Day Care	30	9,585Hours	\$5.50	\$52,715	A
Home Modification	10	10 Requests	\$539.70	\$5,397.000	NB
<b>Caregiver Support Services</b>					
Information	200	400 Contacts	\$0	\$0	
Assistance	200	400 Contacts	\$0	\$0	
Counseling	135	145 Sessions	\$94.00	\$13,656	NE
Support Groups	80	40 Sessions	\$325.00	\$13,000	NE
Training	100	8 Sessions	\$667.00	\$5,336	NE
Respite – In-home	10	993 Hours	\$26.16	\$25,977	NE
Information Services - activities	25	7 activities	\$250.00	\$1,750	NE
Grandparents Raising Grandchildren - respite - support group	70	12 sessions 20 sessions	\$100.45 \$187	\$5,284	NE

SUPPORTIVE SERVICES: COMMUNITY-BASED					
Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
Volunteer	350			\$65,847 \$90,635	NO S
Disease Prevention-Enhance Fitness	200	1,404 Sessions	\$161.91	\$105,757 \$114,211 \$7,358	A S ND
Disease Prevention-Better Choices, Better Health	70	7workshops 42 Sessions	\$849.47	\$28,320	A
<i>NUTRITION PROGRAM</i>					
Meals-Home Delivered	300	39,623 Meals	\$8.75	\$88,900 \$128,955 \$128,850	NC2 S A
Meals-Congregate	200	10,600 Meals	\$7.00	\$74,187	NC1
<i>LEGAL SERVICES</i>					
Legal Assistance	300	1,295 Hours	\$50.50	\$64,767	NB

NB = Federal Funds (Title III-Part B)  
 NC-1 = Federal Funds (Title III-Part C-1)  
 NC-2 = Federal Funds (Title III-Part C-2)  
 ND = Federal Funds (Title III-Part D)  
 NE = Federal Funds (Title III-Part E)  
 NO = Federal Funds (Other)  
 NO - CPPW = Communities Putting Prevention To Work  
 ARRA = American Recovery and Reinvestment Act of 2009  
 A = State General Funds (General Funds)  
 AO = State Funds (Other)  
 S = County Funds (Cash only)  
 PI = Includes all income generated by the program including client voluntary contributions money raised by the program through fund raising activities (such as bake sales, etc.) proceeds from the sale of tangible property, royalties, etc.  
 O = Other funds used directly by the program including but not limited to trust funds, private donations, etc. (cash only)  
 XS = County In-kind  
 XO = Other In-kind

**Planned Service Outputs and Resource Allocation Levels  
Year 2021**

Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
<b>ACCESS</b>					
Information & Assistance	1,400	6,700 Contacts	\$42.00	\$93,264 \$188,536	NB S
Outreach	1,006	1,006 Contacts	\$70.00	\$23,316 \$47,134	NB S
Case Management	90	846 Hours	\$65.00	\$55,000	A
Transportation	130	* 8,468 Trips	\$14.87	\$125,934	A
<b>SUPPORTIVE SERVICES: IN-HOME</b>					
Homemaker	35	1,975 Hours	\$24.00	\$47,410	A
Personal Care	25	2,135 Hours	\$27.00	\$57,640	A
Adult Day Care	30	9,585Hours	\$5.50	\$52,715	A
Home Modification	10	10 Requests	\$539.70	\$5,397.000	NB
<b>Caregiver Support Services</b>					
Information	200	400 Contacts	\$0	\$0	
Assistance	200	400 Contacts	\$0	\$0	
Counseling	135	145 Sessions	\$94.00	\$13,656	NE
Support Groups	80	40 Sessions	\$325.00	\$13,000	NE
Training	100	8 Sessions	\$667.00	\$5,336	NE
Respite – In-home	10	993 Hours	\$26.16	\$25,977	NE
Information Services - activities	25	7 activities	\$250.00	\$1,750	NE
Grandparents Raising Grandchildren - respite - support group	70	12 sessions 20 sessions	\$100.45 \$187	\$5,284	NE

\* Reduction in Number of Unduplicated Persons and/or Service Units due to increase in Unit Cost.

SUPPORTIVE SERVICES: COMMUNITY-BASED					
Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
Volunteer	350			\$65,847 \$90,635	NO S
Disease Prevention-Enhance Fitness	200	1,404 Sessions	\$161.91	\$105,757 \$114,211 \$7,358	A S ND
Disease Prevention-Better Choices, Better Health	70	7workshops 42 Sessions	\$849.47	\$28,320	A
<b>NUTRITION PROGRAM</b>					
Meals-Home Delivered	* 96	25,214 Meals	\$13.75	\$88,900 \$128,955 \$128,850	NC2 S A
Meals-Congregate	*142	7,418 Meals	\$10.00	\$74,187	NC1
<b>LEGAL SERVICES</b>					
Legal Assistance	300	1,295 Hours	\$50.50	\$64,767	NB

NB = Federal Funds (Title III-Part B)  
 NC-1 = Federal Funds (Title III-Part C-1)  
 NC-2 = Federal Funds (Title III-Part C-2)  
 ND = Federal Funds (Title III-Part D)  
 NE = Federal Funds (Title III-Part E)  
 NO = Federal Funds (Other)  
 ARRA = American Recovery and Reinvestment Act of 2009  
 A = State General Funds (General Funds)  
 AO = State Funds (Other)  
 S = County Funds (Cash only)  
 PI = Includes all income generated by the program including client voluntary contributions money raised by the program through fund raising activities (such as bake sales, etc.) proceeds from the sale of tangible property, royalties, etc.  
 O = Other funds used directly by the program including but not limited to trust funds, private donations, etc. (cash only)  
 XS = County In-kind  
 XO = Other In-kind

\* Reduction in Number of Unduplicated Persons and/or Service Units due to increase in Unit Cost.



**Planned Service Outputs and Resource Allocation Levels  
Year 2022**

Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
<b>ACCESS</b>					
Information & Assistance	1,400	6,700 Contacts	\$42.00	\$93,264 \$188,536	NB S
Outreach	1,006	1,006 Contacts	\$70.00	\$23,316 \$47,134	NB S
Case Management	90	846 Hours	\$65.00	\$55,000	A
Transportation	130	*8,468 Trips	\$14.87	\$125,934	A
<b>SUPPORTIVE SERVICES: IN-HOME</b>					
Homemaker	35	1,975 Hours	\$24.00	\$47,410	A
Personal Care	25	2,135 Hours	\$27.00	\$57,640	A
Adult Day Care	30	9,585Hours	\$5.50	\$52,715	A
Home Modification	10	10 Requests	\$539.70	\$5,397.000	NB
<b>Caregiver Support Services</b>					
Information	200	400 Contacts	\$0	\$0	
Assistance	200	400 Contacts	\$0	\$0	
Counseling	135	145 Sessions	\$94.00	\$13,656	NE
Support Groups	80	40 Sessions	\$325.00	\$13,000	NE
Training	100	8 Sessions	\$667.00	\$5,336	NE
Respite – In-home	10	993 Hours	\$26.16	\$25,977	NE
Information Services - activities	25	7 activities	\$250.00	\$1,750	NE
Grandparents Raising Grandchildren - respite - support group	70	12 sessions 20 sessions	\$100.45 \$187	\$5,284	NE

\* Reduction in Number of Unduplicated Persons and/or Service Units due to increase in Unit Cost.

SUPPORTIVE SERVICES: COMMUNITY-BASED					
Programs and Services	Projected Number of Unduplicated Persons and Service Units		Projected Total Allocation by Funding Source		
	Persons	Units	Unit Cost	Allocation	Sources
Volunteer	350			\$65,847 \$90,635	NO S
Disease Prevention-Enhance Fitness	200	1,404 Sessions	\$161.91	\$105,757 \$114,211 \$7,358	A S ND
Disease Prevention-Better Choices, Better Health	70	7workshops 42 Sessions	\$849.47	\$28,320	A
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Disease Prevention-Better Choices, Better Health	70	7workshops 42 Sessions	\$849.47	\$28,320	A
-					
<b>NUTRITION PROGRAM</b>					
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 XS = County In-kind  
 XO = Other In-kind

\* Reduction in Number of Unduplicated Persons and/or Service Units due to increase in Unit Cost.

**EXHIBIT T-2: Minimum Percentages for  
Title III Part B Categories of Services**

For the duration of the Area Plan, the Area Agency on Aging assures that the following minimum percentages of funds received for Title III-B will be expended to provide each of the following categories of services, as specified in OAA Section 306(a):

<b><u>Categories of Services</u></b>	<b><u>Percent</u></b>
<b>Access</b>	<b>5%</b>
<b>In Home</b>	<b>5%</b>
<b>Legal</b>	<b>30%</b>
<b>Total Percent</b>	<b>40%</b>

**\*Transportation, health services (including mental health services), outreach, information and assistance, and case management services)**

## **Exhibit U: PART V. Evaluation Strategy**

**The County of Kaua‘i Agency on Elderly Affairs is developing and will implement an evaluation plan of their respective Area Plans. The evaluation plan is based on the stated goals and objectives as described in Part V of the Area Plan. The evaluation plan consists of process and outcome evaluations, and will address the following questions:**

### **Process evaluation:**

- 1. To what extent were the stated activities met?**
- 2. Who and how many were served?**
- 3. To what extent were the targeted populations served?**
- 4. To what extent were the services utilized?**
- 5. How does current performance compare to previous performance?**

### **Outcome evaluation:**

- 6. To what extent were the stated objectives met?**
- 7. How satisfied were the clients with the services provided?**
- 8. To what extent were there changes in the clients’ knowledge, attitude, and behavior?**
- 9. How successful were the services in terms of cost-benefit?**

**The County of Kaua‘i Agency on Elderly Affairs drafted program logic models for each stated goal. The models identify anticipated/intended resources, activities, outputs, outcomes and measures, and data collection tool. See Appendix H for a template of the program logic model.**

**The evaluation will be conducted through the use of uniform survey instruments developed by the EOA and the AAAs.**

**The County of Kaua‘i Agency on Elderly Affairs will submit an Annual Cumulative Area Plan Evaluation Report to the EOA. This narrative report will be based on data gathered from the evaluation conducted according to the evaluation plan as well as other reports listed in the Federal and State Reporting Requirements for AAAs.**

## **Appendix A. Assurances**

- A1. Assurance of Compliance with the Department of Health and Human Services Regulation Under Title VI of the Civil Rights Act of 1964**
- A2. Department of Health and Human Services Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended**
- A3. General and Program Specific Provisions and Assurances**
  - a. General Assurances**
  - b. Program Specific Assurances**
  - c. Other Assurances as Related to the Code of Federal Regulation 1321.17(F) 1 to 15**
  - d. Certification Regarding Lobbying**

## Appendix A1

### **ASSURANCE OF COMPLIANCE WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES REGULATION UNDER TITLE VI OF THE CIVIL RIGHTS ACT OF 1964**

The County of Kaua'i Agency on Elderly Affairs, (hereinafter called the "Applicant") HEREBY AGREES THAT it will comply with title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services

(45 CFR Part 90) issued pursuant to that title, to the end that, in accordance with title VI of that Act and the Regulation, no person in the United States shall on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant received Federal financial assistance from the Department; and HEREBY GIVES ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. In all other cases, this assurance shall obligate the Applicant for the period during which the Federal financial assistance is extended to it by the Department.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Applicant by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The Applicant recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Applicant.

Date \_\_\_\_\_

County of Kaua'i Agency on Elderly Affairs  
Piikoi Building  
4444 Rice Street, Ste. 330  
Lihu'e, Hawai'i 96766

By

\_\_\_\_\_  
(President, Chairman of Board, or  
comparable authorized official)



## Appendix A2

### DEPARTMENT OF HEALTH AND HUMAN SERVICES ASSURANCE OF COMPLIANCE WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, AS AMENDED

The undersigned (hereinafter called the “recipient”) HEREBY AGREES THAT it will comply with section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), all requirements imposed by the applicable HHS regulation (45 C.F.R. Part 84), and all guidelines and interpretations issued pursuant thereto.

Pursuant to the regulation [45 C.F.R. 84(a)], the recipient gives this Assurance in consideration of and for the purpose of obtaining any and all federal grants, loans, contracts (except procurement contracts and contracts of insurance or guaranty), property, discounts, or other federal financial assistance extended by the Department of Health and Human Services after the date of this Assurance, including payments or other assistance made after such date on applications for federal assistance that were approved before such date. The recipient recognizes and agrees that such federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance through lawful means. This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

This Assurance obligates the recipient for the period during which federal financial assistance is extended to it by the Department of Health and Human Services or, where the assistance is in the form of real or personal property, for the period provided for in the regulation [45 C.F.R.84.5(b)].

The recipient: (Check one box)

- ☐ employs fewer than fifteen persons  
☒ employs fifteen or more persons and pursuant to the regulation [45 C.F.R.84.7(a)], has designated the following person(s) to coordinate its efforts to comply with the HHS regulation:

Agency on Elderly Affairs  
Designee

County of Kaua’i  
Name of Recipient

Piikoi Building, 4444 Rice Street, Ste. 330  
Street Address

99-6000658  
(IRS) Employer Identification No.

Lihue, Hawaii 96766  
City, State, Zip Code

I Certify that the above information is complete and correct to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Derek S. K. Kawakami, Mayor, County of Kaua’i

**Appendix A3**  
**General and Program Specific Provisions and Assurances**

The County of Kaua'i Agency on Elderly Affairs certifies that it will subscribe and conform to the provisions and assurances under GENERAL ASSURANCES AND PROGRAM SPECIFIC PROVISIONS AND ASSURANCES displayed in the following pages \_\_\_\_ through \_\_\_\_.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Derek S. K. Kawakami, Mayor, County of Kaua'i

### **A3a. General Assurances**

The Area Agency will maintain documentation to substantiate all the following assurance items. Such documentation will be subject to State and/or federal review for adequacy and completeness.

#### **1. General Administration**

##### **a. Compliance with Requirements**

The Area Agency agrees to administer the program in accordance with the Older Americans Act of 1965, as amended, the Area Plan, and all applicable rules and regulations and policies and procedures established by the Commissioner or the Secretary and by the Director of the Executive Office on Aging.

##### **b. Efficient Administration**

The Area Agency utilizes such methods of administration as are necessary for the proper and efficient administration of the Plan.

##### **c. General Administrative and Fiscal Requirements**

The Area Agency's uniform administrative requirements and cost principles are in compliance with the relevant provisions of 45 CFR Part 92 and 45 CFR 16 except where these provisions are superseded by statute and with the State Policies and Procedures Manual for Title III of the Older Americans Act.

##### **d. Training of Staff**

The Area Agency provides a program of appropriate training for all classes of positions and volunteers, if applicable.

##### **e. Management of Funds**

The Area Agency maintains sufficient fiscal control and accounting procedures to assure proper disbursement of and account for all funds under this Plan.

##### **f. Safeguarding Confidential Information**

The Area Agency has implemented such regulations, standards, and procedures as are necessary to meet the requirements on safeguarding confidential information under relevant program regulations.

g. Reporting Requirements

The Area Agency agrees to furnish such reports and evaluations to the Director of the Executive Office on Aging as may be specified.

h. Standards for Service Providers

All providers of service under this Plan operate fully in conformance with all applicable Federal, State, and local fire, health, safety and sanitation, and other standards prescribed in law or regulations. The Area Agency provides that where the

State or local public jurisdictions require licensure for the provision of services, agencies providing such services shall be licensed.

i. Amendments to Area Plan

Area Plan amendments will be made in conformance with applicable program regulations.

j. Intergovernmental Review of Services and Programs

The Area Agency will assure that 45 CFR 100 covering Intergovernmental Review of Department of Human Services Programs and Activities be maintained. The regulation is intended to foster an intergovernmental partnership and a strengthened Federalism by relying on State processes and on State, areawide, regional, and local coordination for review of proposed Federal financial assistance and direct Federal development.

k. Standards for a Merit System of Personnel Administration

The Area Agency will assure that there are Standards for a Merit System of Personnel Administration as stated in 5 CFR Part 900, Subpart F.

2. Equal Opportunity and Civil Rights

a. Equal Employment Opportunity

The Area Agency has an equal employment opportunity policy, implemented through an affirmative action plan for all aspects of personnel administration as specified in 45 CFR Part 70.4.

b. Non-Discrimination on the Basis of Handicap

All recipients of funds from the Area Agency are required to operate each

program activity so that, when viewed in its entirety, the program or activity is

readily accessible to and useable by handicapped persons, as specified in 45 CFR 84.

c. Non-Discrimination on the Basis of Age

The Area Agency will assure compliance with 45 CFR 91 which is the regulation for The Age Discrimination Act of 1975 as amended and is designed to prohibit discrimination on the basis of age.

d. Civil Rights Compliance

The Area Agency has developed and is implementing a system to ensure that benefits and services available under the Area Plan are provided in a non-discriminatory manner as required by Title VI of the Civil Rights Act of 1964 as amended.

3. Provision of Services

a. Needs Assessment

The Area Agency has a reasonable and objective method for determining the needs of all eligible residents of all geographic areas in the PSA for allocating resources to meet those needs.

b. Priorities

The Area Agency has a reasonable and objective method for establishing priorities for service and such methods are in compliance with the applicable statute.

c. Eligibility

The activities covered by this Area Plan serve only those individuals and groups eligible under the provisions of the applicable statute.

d. Residency

No requirements as to duration of residence or citizenship will be imposed as a condition of participation in the Area Agency's program for the provision of services.

e. Coordination and Maximum Utilization of Services

The Area Agency to the maximum extent coordinates and utilizes the services and resources of other appropriate public and private agencies and organizations.

4. Non-Construction Programs

a. Legal Authority

The Area Agency has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management, and completion of the project described in non-construction program application.

b. Hatch Act

The Area Agency will comply with the provisions of the Hatch Act (5 U.S.C. SS 1501-1508 and 73224-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

c. Single Audit Act of 1984

The Area Agency will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

d. Other Laws

The Area Agency will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

### **A3b. Program Specific Provisions and Assurances**

Program specific assurances will follow the intent of the area plans as stated in section 306 of the Older Americans Act, as amended in 2006.

#### **Section 306 AREA PLANS**

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i)(I) provide assurances that the area agency on aging will—

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement; and

(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:

in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including--

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will



pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used-

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

In addition, the Area Agency on Aging agrees to comply with the requirements of the Older Americans Act, as amended in 2006, including sections: 305, 307, 373, and 705 and all applicable Federal Rules and Regulations.

### **A3c. Other Assurances As Related to the Code of Federal Register 1321.17(F) 1 to 15**

#### **1321.17(f)(1)**

Each Area Agency engages only in activities that are consistent with its statutory mission as prescribed in the Act and as specified in State policies under §1321.11;

#### **1321.17(f)(2)**

Preference is given to older persons in greatest social or economic need in the provision of services under the plan;

#### **1321.17(f)(3)**

Procedures exist to ensure that all services under this part are provided without use of any means tests;

#### **1321.17(f)(4)**

All services provided under Title III meet any existing State and local licensing, health and safety requirements for the provision of those services;

#### **1321.17(f)(5)**

Older persons are provided opportunities to voluntarily contribute to the cost of services;

#### **1321.17(f)(6)**

Area plans will specify as submitted, or be amended annually to include, details of the amount of funds expended for each priority service during the past fiscal year;

#### **1321.17(f)(7)**

The State Agency on Aging will develop policies governing all aspects of programs operated under this part, including the manner in which the ombudsman program operates at the State level and the relation of the ombudsman program to Area Agencies where Area Agencies have been designated;

#### **1321.17(f)(8)**

The State Agency on Aging will require the area agencies on aging to arrange for outreach at the community level that identifies individuals eligible for assistance under this Act and other programs, both public and private, and informs them of the availability of assistance. The outreach efforts will place special emphasis on reaching older individuals with the greatest economic or social needs with particular attention to low income minority individuals, including outreach to identify older Indians in the planning and service area and inform such older Indians of the availability of assistance under the Act.

#### **1321.17(f)(9)**

Data collection from Area Agencies on Aging to permit the State to compile and transmit to the Commissioner accurate and timely statewide data requested by the Commissioner in such form as the Commissioner directs; and

**1321.17(f)(10)**

If the State agency proposes to use funds received under section 303(f) of the Act for services other than those for preventive health specified in section 361, the State plan and the area plan will demonstrate the unmet need for the services and explain how the services are appropriate to improve the quality of life of older individuals, particularly those with the greatest economic or social need, with special attention to low-income minorities.

**1321.17(f)(11)**

Area Agencies will compile available information, with necessary supplementation, on courses of post-secondary education offered to older individuals with little or no tuition. The assurance will include a commitment by the area agencies to make a summary of the information available to older individuals at multipurpose senior centers, congregate nutrition sites, and in other appropriate places.

**1321.17(f)(12)**

Individuals with disabilities who reside in a non-institutional household with and accompany a person eligible for congregate meals under this part will be provided a meal on the same basis that meals are provided to volunteers pursuant to section 307(a)(13)(I) of the Act.

**1321.17(f)(13)**

The services provided under this part will be coordinated where appropriate with the services provided under Title VI of the Act.

**1321.17(f)(14)**

- (i) The State agency will not fund program development and coordinated activities as a cost of supportive services for the administration of area plans until it has first spent 10 percent of the total of its combined allotments under Title III on the administration of area plans;
- (ii) State and Area Agencies on Aging will, consistent with budgeting cycles (annually, biannually, or otherwise), submit the details of proposals to pay for program development and coordination as a cost of supportive services, to the general public for review and comment; and
- (iii) The State agency certifies that any such expenditure by an Area Agency will have a direct and positive impact on the enhancement of services for older persons in the planning and service area.

**1321.17(f)(15)**

The State agency will assure that where there is a significant population of older Indians in any planning and service area that the area agency will provide for outreach as required by section 306(a)(6)(N) of the Act.

**The Area Agency on Aging will meet all assurances as required under CFR §1321.53 - 1321.61, 1321.63 - 1321.75.**

### **A3d. Certification Regarding Lobbying**

#### **Certification for Contracts, Grants, Loans, and Cooperative Agreements**

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form Report Lobbying", in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

County of Kaua'i Agency on Elderly Affairs  
Organization

Hawaii  
State

\_\_\_\_\_  
Ludvina K. Takahashi  
County Executive on Aging

\_\_\_\_\_  
Date

## Appendix B. Staffing

### Appendix B. Staffing

<u>Primary Area Agency Responsibilities</u>	<u>Position with Lead Authority for Decision-Making for Defined Responsibilities</u>
1. <u>General Administration</u>	<u>Descriptive Position Title</u>
• Overall program administration	<u>Executive on Aging</u>
• The statement of written procedures for carrying out all defined responsibilities under the Act	<u>Executive on Aging/Planner</u>
• Responding to the views of older persons relative to issues of policy development and program implementation under the Plan	<u>Executive on Aging/Planner/ Information &amp; Referral Specialist/Grants Manager/Program Specialist/Case Manager</u>
• Hiring of staff resources	<u>Executive on Aging</u>
• Organization of staff resources	<u>Executive on Aging</u>
• Liaison to Advisory Council	<u>Executive on Aging</u>
• Public information	<u>I &amp; R Specialist</u>
• Overall program policy	<u>Executive on Aging</u>
• Grants management	<u>Grants Manager</u>
• Fiscal management	<u>Accountant</u>
• Personnel management	<u>Executive on Aging</u>
• Information management/reporting	<u>Executive on Aging/Planner/ Accountant/I &amp; R Specialist/Grants Manager/I &amp; R Program Support Tech.</u>
2. <u>Program Planning</u>	
• Coordinating planning with other agencies and organizations to promote new or expanded benefits and opportunities for older people	<u>Executive on Aging/Planner</u>
• Assessing the kinds and levels of services needed by older persons in the planning and service area, and the effectiveness of other public or private programs serving those needs	<u>Planner</u>

<b><u>Primary Area Agency Responsibilities</u></b>	<b><u>Position with Lead Authority for Decision-Making for Defined Responsibilities</u></b>
<ul style="list-style-type: none"> <li>• Defining means for giving preference to older persons with greatest economic or social need</li> </ul>	<u>Executive on Aging/I&amp;R Specialist/ Grants Manager/Planner/Program Specialist</u>
<ul style="list-style-type: none"> <li>• Defining methods for establishing priorities for services</li> </ul>	<u>Executive on Aging/Planner/ I&amp;R Specialist/Grants Manager/Program Specialist</u>
<ul style="list-style-type: none"> <li>• Conducting research and demonstrations</li> </ul>	<u>Executive on Aging/Planner</u>
<ul style="list-style-type: none"> <li>• Resource identification/Grantsmanship</li> </ul>	<u>Executive on Aging/Planner/Grants Manager</u>
3. <u>Advocacy</u> <ul style="list-style-type: none"> <li>• Monitoring, evaluating, and commenting on all plans, programs, hearings, and community actions which affect older people</li> </ul>	<u>Executive on Aging/Planner/ I&amp;R Specialist/Grants Manager/Program Specialist/Case Manager</u>
<ul style="list-style-type: none"> <li>• Conducting public hearings on the needs of older persons</li> </ul>	<u>Executive on Aging/Planner</u>
<ul style="list-style-type: none"> <li>• Representing the interests of older people to public officials, public and private agencies or organizations</li> </ul>	<u>All staff</u>
<ul style="list-style-type: none"> <li>• Facilitate the support of activities to increase community awareness of the needs of residents of long term care facilities</li> </ul>	<u>I&amp;R Specialist/Program Specialist</u>
<ul style="list-style-type: none"> <li>• Conducting outreach efforts, with special emphasis on the rural elderly, to identify older persons with greatest economic or social needs and to inform them of the availability of services under the Plan</li> </ul>	<u>I&amp;R Specialist</u>
4. <u>Systems Development</u> <ul style="list-style-type: none"> <li>• Defining community service area boundaries</li> </ul>	<u>I&amp;R Specialist</u>
<ul style="list-style-type: none"> <li>• Designating community focal points</li> </ul>	<u>Planner</u>
<ul style="list-style-type: none"> <li>• Pursuing plans to assure that older people in the planning and service area have reasonably convenient access to services</li> </ul>	<u>Executive on Aging/I&amp;R Specialist Planner</u>
<ul style="list-style-type: none"> <li>• Entering into subgrants or contracts with service providers</li> </ul>	<u>Executive on Aging/Grants Manager</u>
<ul style="list-style-type: none"> <li>• Providing technical assistance to service providers</li> </ul>	<u>Grants Manager/Accountant</u>

**Primary Area Agency  
Responsibilities**

- Pursuing plans for developing a system of services comprised of access services, in-home services, community services
- Coordinating plan activities with other programs supported by federal, State, and local resources in order to develop a comprehensive and coordinated service system in the planning and service area

5. **Program Maintenance**

- Monitoring performance of all service providers under the Plan
- Evaluating performance of all service providers
- Providing feedback to providers and key decision-makers
- Monitoring and evaluating coordinated services for older people in the planning and service area

**Position with Lead Authority for  
Decision-Making for Defined  
Responsibilities**

Planner/Program Specialist/Grants Manager/  
I & R Specialist/Case Manager/

All staff

Grants Manager/I & R Specialist/Program  
Specialist/Case Manager

Executive on Aging/Grants  
Manager/Planner/Program Specialist/I & R  
Specialist/Accountant/Case Manager

Executive on Aging/Grants Manager/  
Accountant

Executive on Aging/Grants Manager/  
Accountant/Planner/Program Specialist/  
I & R Specialist/Case Manager



## Appendix C: Glossary

### 1. Programs, Services, and Activities

**Adult Day Care/Adult Day Health:** Personal care for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with Adult Day Care/adult day health typically include social and recreational activities, training, counseling, and services such as rehabilitation, medications assistance and home health aide services for adult day health. (FSRR, 2005).

**Assisted Transportation:** Assistance and transportation, including escort, to a person who has difficulties (physical or cognitive) using regular vehicular transportation. (FSRR, 2005).

**Case Management:** Assistance either in the form of access or care coordination in circumstances where the older person is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers or family caregivers. Activities of case management include such practices as assessing needs, developing care plans, authorizing and coordinating services among providers, and providing follow-up and reassessment, as required. (FSRR, 2005).

**Chore:** Assistance such as heavy housework, yard work or sidewalk maintenance for a person. (FSRR, 2005).

**Congregate Meal:** A meal provided to a qualified individual in a congregate or group setting. The meal as served meets all of the requirements of the OAA and State/Local laws. (FSRR, 2005).

**Disease Prevention and Health Promotion Services:** Health risk assessments; routine health screening, which may include hypertension, glaucoma, cholesterol, cancer, vision, hearing, diabetes, bone density, and nutrition screening; nutritional counseling and educational services for individuals and their primary caregivers; evidence-based health promotion programs, including programs related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition; programs regarding physical fitness, group exercise, and music, art, and dance-movement therapy, including programs for multigenerational participation that are provided by an institution of higher education, a local educational agency, as defined in section 1471 of the Elementary and Secondary Education Act of 1965, or a community-based organization; home injury control services, including screening of high-risk home environments and provision of educational programs on injury prevention (including fall and fracture prevention) in the home environment; screening for the prevention of depression, coordination of community mental health services, provision of educational activities, and referral to psychiatric and psychological services; educational programs on the availability, benefits, and appropriate use of preventive health services covered under title XVIII of the Social Security Act; medication management screening and education to prevent incorrect medication

and adverse drug reactions; information concerning diagnosis, prevention, treatment, and rehabilitation of diseases, and Alzheimer's disease and related disorders with neurological and organic brain dysfunction; gerontological counseling; and counseling regarding social services and follow-up health services based on any of the services described earlier. (OAA, Sec 102 (12)).

**Education and Training Service:** A supportive service designed to assist older individuals to better cope with their economic, health, and personal needs through services such as consumer education, continuing education, health education, preretirement education, financial planning, and other education and training services which will advance the objectives of the Older Americans Act, as amended. (OAA, Sec 302 (3)).

**Home-Delivered Meal:** A meal provided to a qualified individual in his/her place of residence. The meal is served in a program administered by State Units on Aging and/or Area Agencies on Aging and meets all of the requirements of the Older Americans Act and State/Local laws. (FSRR, 2005).

**Homemaker:** Assistance such as preparing meals, shopping for personal items, managing money, using the telephone or doing light housework. (FSRR, 2005).

**Information and Assistance:** A service that: a) provides individuals with information on services available within the communities; b) links individuals to the services and opportunities that are available within the communities; c) to the maximum extent practicable, establishes adequate follow-up procedures. (FSRR, 2005).

**Legal Assistance:** Legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney. (FSRR, 2005).

**Nutrition Counseling:** Individualized guidance to individuals who are at nutritional risk because of their health or nutrition history, dietary intake, chronic illnesses, or medications use, or to caregivers. Counseling is provided one-on-one by a registered dietitian, and addresses the options and methods for improving nutrition status. (FSRR, 2005).

**Nutrition Education:** A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants, caregivers, or participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise. (FSRR, 2005).

**Outreach:** Intervention with individuals initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits. (FSRR, 2005).

**Personal Care:** Personal assistance, stand-by assistance, supervision or cues. (FSRR, 2005).

**Senior Opportunities and Services:** Designed to identify and meet the needs of low-income older individuals in one or more of the following areas: (a) development and provision of new volunteer services; (b) effective referral to existing health, employment, housing, legal, consumer, transportation, and other services; (c) stimulation and creation of additional services and programs to remedy gaps and deficiencies in presently existing services and programs; and (d) such other services as the Assistant Secretary may determine are necessary or especially appropriate to meet the needs of low-income older individuals and to assure them greater self-sufficiency. (OAA, Sec 321 (14)).

**Transportation:** Transportation from one location to another. Does not include any other activity. (FSRR, 2005).

## **2. Services to Caregivers**

**Information Services:** A service for caregivers that provides the public and individuals with information on resources and services available to the individuals within their communities. (FSRR, 2005).

**Access Assistance:** A service that assists caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures. (FSRR, 2005).

**Counseling:** Counseling to caregivers to assist them in making decisions and solving problems relating to their caregiver roles. This includes counseling to individuals, support groups, and caregiver training (or individual caregivers and families). (FSRR, 2005).

**Respite Care:** Services which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite Care includes: 1) In-home respite (personal care, homemaker, and other in-home respite); 2) respite provided by attendance of the care recipient at a senior center or other nonresidential program; 3) institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver; and (for grandparents caring for children) summer camps. (FSRR, 2005).

**Supplemental Services:** Services provided on a limited basis to complement the care provided by caregivers. Examples of supplemental services include, but are not limited to, home modifications, assistive technologies, emergency response systems, and incontinence supplies. (FSRR, 2005).

## **3. Facilities**

**Focal Point:** A facility established to encourage the maximum collocation and coordination of services for older individuals. (OAA, Sec 102 (25)).

**Multipurpose Senior Center:** A community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals. (OAA, Sec 102 (33)).

#### **4. Special Populations and Definitions Related to Special Populations**

**Adult Child with a Disability** means a child who: (A) is 18 years of age or older; (B) is financially dependent on an older individual who is a parent of the child; and (C) has a disability. (OAA, Sec 102 (15)).

**At Risk for Institutional Placement:** With respect to an older individual, that such individual is unable to perform at least two activities of daily living without substantial assistance (including verbal reminding, physical cuing, or supervision) and is determined by the State involved to be in need of placement in a long-term care facility. (OAA, Sec 101 (45)).

**Child:** An individual who is not more than 18 years of age or who is an individual with a disability. (OAA, Sec. 372 (1)).

**Disability:** (Except when such term is used in the phrase “severe disability”, “developmental disabilities”, “physical or mental disability”, “physical and mental disabilities”, or “physical disabilities”) a disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in 1 or more of the following areas of major life activity: (A) self care, (B) receptive and expressive language, (C) learning, (D) mobility, (E) self-direction, (F) capacity for independent living, (G) economic self-sufficiency, (H) cognitive functioning, and (I) emotional adjustment. (OAA, Sec 102 (8)).

**Elder Abuse, Neglect, and Exploitation:** Abuse, neglect, and exploitation, of an older individual. (OAA, Sec 102 (23)).

- (1) **Abuse:** The willful: (a) infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical harm, pain, or mental anguish; or (b) deprivation by a person, including a caregiver, of goods or services that are necessary to avoid physical harm, mental anguish, or mental illness. (OAA, Sec 102 (13)).
- (2) **Exploitation:** The fraudulent or otherwise illegal, unauthorized, or improper act or process of an individual, including a caregiver or fiduciary, that uses the resources of an older individual for monetary or personal benefit, profit, or gain, or that results in depriving an older individual of rightful access to, or use of, benefits, resources, belonging, or assets. (OAA, Sec 101 (24)).
- (2) **Neglect** means: (a) the failure to provide for oneself the goods or services that are necessary to avoid physical harm, mental anguish, or mental illness; or (b) the failure of a caregiver to provide the goods or services. (OAA, Sec 102 (34)).
- (4) **Physical Harm:** Bodily injury, impairment, or disease. (OAA, Sec 102 (36)).

**Family Caregiver:** An adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction. (OAA, Sec 302 (4)).

**Frail:** With respect to an older individual in a State, that the older individual is determined to be functionally impaired because the individual: (A) is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or at the option of the State, is unable to perform at least three such activities without such assistance; or (B) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual. (OAA, Sec 102 (26)).

**Grandparent or other older relative caregiver of a child:** A grandparent, step grandparent or other relative of a child by blood or marriage, who is 60 years of age or older and (a) lives with the child; (b) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and (c) has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally. (FSRR, 2005).

**Greatest Economic Need:** The need resulting from an income level at or below the poverty line. (OAA, Sec 102 (27)).

**Greatest Social Need:** The need caused by non-economic factors, which include: (A) physical and mental disabilities; (B) language barriers; and (C) cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that: (i) restricts the ability of an individual to perform normal daily tasks; or (ii) threatens the capacity of the individual to live independently. (OAA, Sec 102 (28)).

**Grandparent or Older Individual who is a Relative Caregiver:** A grandparent or stepgrandparent of a child, or a relative of a child by blood, marriage, or adoption, who is 55 years of age or older and—(A) lives with the child; (B) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and (C) has a legal relationship to the child, as such legal custody or guardianship, or is raising the child informally. (OAA, Sec. 372 (3)).

**Impairment in Activities of Daily Living:** The inability to perform one or more of the following six activities of daily living without personal assistance, stand-by assistance, supervision or cues: eating, dressing, bathing, toileting, transferring in and out of bed/chair, and walking. (FSRR, 2005).

**Impairment in Instrumental Activities of Daily Living:** The inability to perform one or more of the following eight instrumental activities of daily living without personal assistance, or stand-by assistance, supervision or cues: preparing meals, shopping for personal items, medication management, managing money, using telephone, doing heavy housework, doing light housework, and transportation ability. (FSRR, 2005).

**Living Alone:** A one person household (using the Census definition of household) where the householder lives by his or herself in an owned or rented place of residence in a non-institutional setting, including board and care facilities, assisted living units and group homes. (FSRR, 2005).

**Older Individual:** An individual who is 60 years of age or older. (OAA, Sec 102 (35)).

**Poverty:** Persons considered to be in poverty are those whose income is below the official poverty guideline (as defined each year by the Office of management and Budget, and adjusted by the Secretary, DHHS) in accordance with subsection 673 (2) of the Community Services Block Grant Act (42 U.S.C. 9902 (2)). The annual HHS Poverty Guidelines provide dollar thresholds representing poverty levels for households of various sizes. (FSRR, 2005).

**Rural:** A rural area is any area that is not defined as urban. Urban areas comprise (1) urbanized areas (a central place and its adjacent densely settled territories with a combined minimum population of 50,000) and (2) an incorporated place or a census designated place with 20,000 or more inhabitants. (FSRR, 2005).

**Severe Disability:** Severe, chronic disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that: is likely to continue indefinitely; and results in substantial functional limitation in 3 or more of the major life activities specified in subparagraphs (A) through (G) of paragraph (8) of the Older Americans Act, as amended. (OAA, Sec 102 (9)).

## **5. Ethnic Groups**

**Black or African American:** A person having origins in any of the black racial groups of Africa. (FSRR, 2005).

**American Indian or Alaskan Native:** A person having origins in any of the original peoples of North America, and who maintains tribal affiliation or community attachment. (FSRR, 2005).

**Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. (FSRR, 2005).

**Native Hawaiian or Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands. (FSRR, 2005).

**Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. (FSRR, 2005).

**Indian:** A person who is a member of an Indian tribe. (OAA, Sec 102 (5)).

**Native American:** Refers to American Indians, Alaskan Natives, and Native Hawaiians. (OAA, Sec 601).

**Native Hawaiian:** Any individual any of whose ancestors were natives of the area which consists of the Hawaiian Islands prior to 1778. (OAA, Sec 625).

**White:** A person having origins in any of the peoples of Europe, the Middle East, or North Africa. (FSRR, 2005).

## **6. Other Definitions**

**Aging and Disability Resource Center'** means an entity established by a State as part of the State system of long-term care, to provide a coordinated system for providing— (A) comprehensive information on the full range of available public and private long-term care programs, options, service providers, and resources within a community, including information on the availability of integrated long-term care; (B) personal counseling to assist individuals in assessing their existing or anticipated long-term care needs, and developing and implementing a plan for long-term care designed to meet their specific needs and circumstances; and (C) consumers access to the range of publicly-supported long-term care programs for which consumers may be eligible, by serving as a convenient point of entry for such programs. (OAA, 102 Sec (44)).

**Aging Network:** The network of State agencies, Area Agencies on Aging, Title VI grantees, and the Administration; and organizations that are providers of direct services to older individuals or are institutions of higher education; and receive funding under this act. (OAA, Sec 102 (16)).

**Area Agency on Aging:** An Area Agency on Aging designated under section 305(a)(2)(A) of the Older Americans Act or a State agency performing the functions of an Area Agency on Aging under section 305(b)(5) of the Older Americans Act. (OAA, Sec 102 (17)).

**Assistive Technology:** Technology, engineering methodologies, or scientific principles appropriate to meet the needs of, and address the barriers confronted by, older individuals with functional limitations. (OAA, Sec 102 (10)).

**Elder Justice:** Used with respect to older individuals, collectively, means efforts to prevent, detect, treat, intervene in, and respond to elder abuse, neglect, and exploitation and to protect older individuals with diminished capacity while maximizing their autonomy. Used with respect to an individual who is an older individual, means the recognition of the individual's rights, including the right to be free of abuse, neglect, and exploitation. (OAA, Sec 102 (47)).

**Long-term care:** Any service, care, or item (including an assistive device), including a disease prevention and health promotion service, an in-home service, and a case management service— (A) intended to assist individuals in coping with, and to the extent practicable compensate for, a functional impairment in carrying out activities of daily living;

(B) furnished at home, in a community care setting (including a small community care setting as defined in subsection (g)(1), and a large community care setting as defined in subsection (h)(1), of section 1929 of the Social Security Act (42 U.S.C. 1396t)), or in a long-term care facility; and (C) not furnished to prevent, diagnose, treat, or cure a medical disease or condition. (OAA, Sec 102 (50)).

**Older Americans Act:** An Act to provide assistance in the development of new or improved programs to help older persons through grants to the States for community planning and services and for training, through research, development, or training project grants, and to establish within the Department of Health, Education, and Welfare an operating agency to be designed as the “Administration on Aging”. (Public Law 89-73).

**Planning and Service Area:** An area designated by a State agency under section 305(a)(1)(E), including a single planning and service area described in section 305(b)(5)(A) of the Older Americans Act. (OAA, Sec 102 (37)).

**Minority Provider:** A provider of services to clients which meets any one of the following criteria: 1) A not for profit organization with a controlling board comprised at least 51% of individuals in the racial and ethnic categories listed below. 2) A private business concern that is at least 51 % owned by individuals in the racial and ethnic categories listed below. 3) A publicly owned business having at least 51% of its stock owned by one or more individuals and having its management and daily business controlled by one or more individuals in the racial and ethnic categories listed below: The applicable racial and ethnic categories include: American Indian or Alaskan Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, or Hispanic. (FSRR, 2005).

**Title III:** The purpose of Title III is to encourage and assist State agencies and Area Agencies on Aging to concentrate resources in order to develop greater capacity and foster the development and implementation of comprehensive and coordinated systems to serve older individuals by entering into new cooperative arrangements in each State with the persons described in paragraph (2) (State agencies and Area Agencies on Aging; other State agencies, including agencies that administer home and community care programs; Indian tribes, tribal organizations, and Native Hawaiian organizations; the providers, including voluntary organizations or other private sector organizations, of supportive services, nutrition services, and multipurpose senior centers; and organizations representing or employing older individuals or their families) for the planning, and for the provision of, supportive services, and multipurpose senior centers, in order to secure and maintain maximum independence and dignity in a home environment for older individuals capable of self care with appropriate supportive services; remove individual and social barriers to economic and personal independence for older individuals; provide a continuum of care for vulnerable older individuals; and secure the opportunity for older individuals to receive managed in-home and community-based long-term care services. (OAA, Sec 301).

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Sources:

(FSRR) Federal and State Reporting Requirements, 2005.  
(OAA) Older Americans Act, as amended.



## Appendix D: Public Informational Meetings and Results

**Tuesday, March 3, 2020, 1:00 p.m., Anahola Clubhouse**

	<b>Last Name</b>	<b>First Name</b>
1		
2		
3		
4		
5		
6		
7		
8		
9		

**Thursday, March 5, 2020, 12:00 p.m., Hanapepe Neighborhood Center**

	<b>Last Name</b>	<b>First Name</b>
1		
2		
3		

### Overview of the Plan

The purpose and overview of the meeting was presented by June Renaud. June explained that the Area Plan serves as the blueprint and framework for the next four years in the planning and development of services and programs for the older adults, people with disabilities, and their caregivers, for the County of Kaua'i.

After approval by the Mayor, plan will be forwarded to the State Executive Office on Aging to develop an overall State plan based on the Area Plans for all of the counties and will be submitted to the U.S. Administration on Aging. In order to receive our Federal funds, our Area Plan must be in compliance of the Federal requirements and initiatives.

### Opportunity for public input/testimony

### Closing Remarks

The public informational meeting was adjourned at

<b>Appendix E: Additional Costs of Providing Services Under Title III to Older Individuals Residing in Rural Areas</b>
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**NOT APPLICABLE**

Rural Areas	FY 2014 Actual Costs	Projected Costs

## **Appendix F: Eldercare**

### **Eldercare**

In accordance with the Older Americans Act, Section **306(a)(13)**, the Kauai Agency on Elderly Affairs will:

**306(a)(13)(A)**

maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

**306(a)(13)(B)**

disclose to the Commissioner and the State agency:

**306(a)(13)(B)(i)**

the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

**306(a)(13)(B)(ii)**

the nature of such contract or such relationship;

**306(a)(13)(C)**

demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;

**306(a)(13)(D)**

demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and

**306(a)(13)(E)**

on the request of the Commissioner or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

The Kauai Agency on Elderly Affairs has contracted with the following service providers to provide the necessary services:

Alzheimer's Association; County Transportation Agency; Bayada Home Health Care; Kauai Economic Opportunity, Inc.; Ohana Pacific Management dba Kauai Adult Day Health Center; Legal Aid Society of Hawaii; Child & Family Service; Mastercare Inc.; Regenerative Living. The performance-based contracts with each service provider serves as the tool in which providers are paid according to units performed.

## Appendix G: Evaluation

### Program Logic Model:

**Goal 1:** \_\_\_\_\_

**Objective 1:** \_\_\_\_\_

Resources	Activities	Outputs	Outcomes	Measures	Data Collection Tool
\$ Personnel Equipment Supplies Volunteers	1.  2.  3.				

**Objective 2:** \_\_\_\_\_

Resources	Activities	Outputs	Outcomes	Measures	Data Collection Tool
\$ Personnel Equipment Supplies Volunteers	1.  2.  3.				